PREA Facility Audit Report: Final

Name of Facility: Franklin County Jail

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 09/04/2020

Auditor Certification		
The contents of this report are accurate to the best of my knowledge.		
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.		V
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.		~
Auditor Full Name as Signed: John J. Prebish, Jr. Date of Signature: 09/0		4/2020

AUDITOR INFORMATION	
Auditor name:	Prebish, John
Email:	jprebishjr@gmail.com
Start Date of On-Site Audit:	07/29/2020
End Date of On-Site Audit:	07/31/2020

FACILITY INFORMATION		
Facility name:	Franklin County Jail	
Facility physical address:	1804 OPPORTUNITY AVE, CHAMBERSBURG, Pennsylvania - 17201	
Facility Phone		
Facility mailing address:		

Primary Contact	
Name:	James J. Sullen
Email Address:	jamess@franklincountypa.gov
Telephone Number:	717.264.9513

Warden/Jail Administrator/Sheriff/Director	
Name:	William D. Bechtold
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Telephone Number:	(717) 264-9513

Facility PREA Compliance Manager	
Name:	Michelle Weller
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Telephone Number:	O: (717) 264-9513

Facility Health Service Administrator On-site	
Name:	Justin Lensbower
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Facility Characteristics		
Designed facility capacity:	500	
Current population of facility:	335	
Average daily population for the past 12 months:	406	
Has the facility been over capacity at any point in the past 12 months?	No	
Which population(s) does the facility hold?	Both females and males	
Age range of population:	13 - 78	
Facility security levels/inmate custody levels:	Minimum, Medium, Maximum	
Does the facility hold youthful inmates?	Yes	
Number of staff currently employed at the facility who may have contact with inmates:	119	
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	26	
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	118	

AGENCY INFORMATION		
Name of agency:	Franklin County Commissioners	
Governing authority or parent agency (if applicable):		
Physical Address:	340 N Second Street, Chambersburg, Pennsylvania - 17201	
Mailing Address:		
Telephone number:		

Agency Chief Executive Officer Information:	
Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA	Coordinator Informa	tion	
Name:	James Sullen	Email Address:	jamess@franklincountypa.gov

AUDIT FINDINGS

Narrative:

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-audit, on-site audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

Background

The on-site audit of the Franklin County Jail was completed on July 29, 30, & 31, 2020 at the facility just outside of the borough of Chambersburg Pennsylvania by PREA Auditor John Prebish a single auditor contracted with the facility. Discussion with the facility began in June/July 2019 when I was contacted by Deputy Warden/PREA Coordinator James Sullen. I contract was exercised with the Facility and County in Late 2019 and an initial timeline established for the audit. We intended on a Spring audit but due to the COVID-19 Pandemic, we adjusted to the July 2020 dates.

The Jail is operated by the county and governed under Pennsylvania rule establishing the Prison Board, a panel made up of the 3 Commissioners, President Judge, Controller, District Attorney, and Sheriff. As with other counties in Pennsylvania, the Franklin County Jail deals with all new arrests in the county unable to post a bond as well as anyone under a county sentence up to 11 ½ months. They will also hold those under bench warrant for the courts for probation violations, domestics relations warrants, and arrestees on warrants for other counties/states. They also hold for the United States Marshals service to provide housing for those individuals under arrest and on trial in the federal court system out of the middle district of Pennsylvania.

The Jail was built in 2007, the building is a Direct Supervisor-style facility with a maximum bed capacity of 500 inmates. Within that environment, they have various classification levels from minimum to maximum and house both male and female inmates. The "direct supervision" concept has become a standard in jail/prison design where correctional personnel is placed directly into a housing unit with cells around the perimeter, stacked with a common day area in the center having full services in the unit...recreation, common area, multipurpose area, counselors' offices, and showers. Food is delivered directly to the unit instead of a central dining hall. There are 9 housing units throughout the facility, one is all single cells, 5 regular hard cell units, and 3 dormitory housing units that are used for lower classifications.

This will be the 2nd PREA Audit for this facility since the PREA Standards were implemented. As indicated, I worked with Deputy Warden Sullen on scheduling the audit and agreed on the July 2020 dates. We also developed a list of documents that I would need for the audit. In Late June 2020, the audit notices were hung in both English and Spanish, and the agency began sending me some documents. I discussed the online audit system with Deputy Sullen and he indicated he was interested in trying it. I began the process to access the online system and was excited myself, as this is my first time

using it as well. I did receive a time-stamped photo if the notices hung in the facility.

Normally I have a host of documents that I request, however using the online audit system allowed for them to be uploaded into the system. Those that were uploaded and sent include the following:

A: Pre-Audit Phase:

- 1) Pre-audit questionnaire
- 2) Agency/Facility Related Policy
- 3) A complete employee roster including:
- a. Agency oversite agency
- b. Warden
- c. PREA Coordinator and Compliance Managers
- d. Specialized staff including medical, mental health, intake staff, training staff, first responders, investigators, and county HR personnel
- e. Contractors and volunteers
- f. SAFE/SANE agency that is utilized for the facility (Chambersburg Hospital)
- 4) An inmate population sheet of all inmates at the facility was provided and including:
- a. Those identifying as LGBTI
- b. Those in segregation (male and female)
- c. Those reporting sexual abuse/victimization upon admission
- d. LEP Inmates
- e. Youthful Inmates (No one identified No youthful offenders incarcerated in the facility at the time of the audit)
- f. Anyone with disabilities
- 5) Any grievances files within the past 12 months related to accounts of sexual abuse/harassment.
- 6) Any sexual abuse/harassment incidents/investigations reported including alleged, substantiated, unsubstantiated, and/or founded/unfounded over the past year and all investigative information related to them.
- a. Including calls to the hotline, reported to staff, 3rd party reporting, etc.
- b. How many were administratively/criminally investigated or are pending?
- 7) Multiple documents included in the operations of the jail such as:

- a. Zero-tolerance policy
- b. Inmate intake screening/education/materials provided
- c. Staff training
- d. Facility layout/footprint
- e. Staffing plan/policy
- f. Facility PREA-related policies
- g. Grievance Policy
- h. Disciplinary Policy
- i. Classification procedures

As indicated the audit was pushed back initially, and again due to the COVID Pandemic. We were ahead enough on the scheduling that it did not interfere with the pre-audit (we didn't start and stop the pre-audit, I was able to work all at once without gaps). When the facility completed the pre-audit, I was able to begin processing the data the sent. I was very impressed with the online system, making it very easy to pull up the date without having email open or documents to gather. That system also allowed the facility to identify the location of each policy section in the pre-audit reporting form. This was very helpful to the auditor to gather the data and also easily find what I was looking for. The Deputy took extra steps to assure all documents I requested were available. I was able to effectively prepare a list of questions for the inhouse audit.

The facility has multiple contracts in place for both PREA assistance such as victims' services and criminal investigations. They also have a long-term contract in place for medical and mental health services at the facility through Prime Care Medical, a Pennsylvania based company that specializes in adult and juvenile facility medical services. Franklin County has contracts in place with 4 other PA counties for the housing of offenders for separation should they have a need. The contracts would allow them to send both men or women to those facilities if they needed to move someone or multiple people. In exploring those facilities, they all have been through previous PREA audits and report to the facility as required.

I was able to contact the Chambersburg Hospital, the Franklin & Fulton County Women in Need, Inc. (Victims Services agency serving ALL inmates at the facility as a victims advocate, and providing counseling services), The Pennsylvania Coalition against Rape (PCAR), and The Rape Abuse and Incest Network (RAINN) concerning services that would be offered to Franklin County inmates. The Chambersburg hospital under the corporate operations of Wellspan is approximately 14 minutes away and their representative indicated they have worked with the facility in the past and provide SAFE/SANE programs to the jail and the entire county through their emergency department. The Franklin & Fulton County Women In Need, Inc (WIN)services the facility for victims advocate service. According to the agency, the are available 24/7 to provide a victims advocate for the facility. they would meet them at the

emergency room and accompany to any medical appointment as well as court service. They also would meet with the inmates at the facility and provide counseling services as well.

The facility also has an agreement with the Pennsylvania State Police (PSP) Chambersburg Barracks for criminal investigative services for all sexual assault cases warranting such investigations. They don't have one specific investigator assigned, but would instead have them at hand should an incident occur at any time, someone would be available. After hours a trooper on shift would be sent to the facility to secure the scene, and begin the investigative process until an investigator could arrive. This is done to assure there is no large gap I service. They would begin taking statements, collect evidence, and interview the accused, and victim in the case. They would hand the case over to the PSP criminal investigators thereafter. All cases founded are referred to the Franklin County District Attorney's office for prosecution.

The jail also contracts with the Pennsylvania Department of Corrections for 24/7 hotline service for the facility. Recently the service was transferred under the Department's Bureau of Community Corrections for monitoring (Agreement provided). According to Deputy Sullen, all inmates can call the service over the blue inmate phones in the housing units. ALL calls are toll-free and are NOT recorded. Posted in the housing units and at the phones indicates the toll-free service by dialing #611 on the phone after prompting for English or Spanish. This Auditor was able to test the phone system while on the inmate housing units. The inmates are also able to contact WIN at their toll-free number on the inmate phone and speak with a representative there 24/7 for victims advocate services. As indicated, the numbers for the PREA Hotline were available in the housing units and at every phone. The inmates were also able to use the electronic tablets in their housing units to access all PREA documents and PREA videos, as well as find the toll free numbers to the hotline, WIN, and several other agencies. They could make a report through the tablet via a request form or grievance.

B. On-site Audit:

The on-site portion of the audit was conducted on July 29, 30, & 31, 2020. A few days prior to this, I forwarded a tentative agenda to the facility with the information listed below as well as a tentative time frame. This gave the facility time to review it before I arrived in case there would be issues at the facility. I attempt to work with the facility's schedule and not against it. I know that they also have needs and I like to make sure we all are in agreement. I was met by Deputy Warden (PREA Coordinator) and escorted into the administrative area of the facility. Therein I was provided with a secure conference room that I would be able to interview staff and review documents. Myself, Warden Bechtold, Deputy Warden Sullen, Deputy Warden Weller, Health Services Administrator (HSA) Justin Lensbower from Prime Care Medical, Major Smith, and The Captain of Investigations met to discuss the steps of the audit.

- a: On-site Audit
- 1) Kick-off meeting and discussion on the format of the time at their facility

- a. Review Auditor Checklist
- b. Review pre-audit questions I had with the group
- c. Discuss any facility changes that have occurred since their last audit, or because of previous audits (if any).
- d. Documents that I want to review including
 - 1. Facility forms (intake/PREA), logs, files, investigations, etc.
- 2) Discuss the logistics of the audit from my perspective including full facility access, space to interview inmates in a confidential manner, practice-based auditing, and established goals for the audit.
- 3) Site review
- 4) I explained the requirements of the facility in relation to the PREA standards and that if there was any corrective action required by the facility how in that period of time we would work on achieving compliance with the standards.
- 5) I also explained that once the on-site audit was complete I would be calling or emailing with more questions and would be returning there audit as soon as possible.
- 6) Random staff interviews (minimum) 13
- 7) Random inmate interviews (minimum) 13
- 8) Target resident interviews (minimum if available) 13
- 9) File and document review
- 10) Secondary question and answer period of additional questions that may arise during the audit.
- 11) Closeout session and preliminary report
- b: Document Review
- 1) Personnel and Training Files The facility keeps personnel files off-site at the county Human Resource Office. Deputy Sullen and I traveled there on day 2 to review staff files, specifically documentation related to background checks. I was able to speak with a representative from the county's HR department for my interview.
- a. Criminal History Information was available showing each employee had an initial background criminal history completed on them, listing dates and findings. All reviewed were free of any criminal offenses at the time of hire. Of those who were employed at the facility for longer than 5 years, there was documentation to show continued criminal history checks were completed by the Human Resource Department. The documents were date and time and signed off on.

- 2) Training Documentation This Auditor was provided training documentation lists for all relevant PREA Training for all employees at the facility during the Pre-audit and while on-site consisting of the following:
- a. Initial PREA training for all new employees from the past year. The documents included course description, date of the class, and a signature line for all employees attending the class.
- b. Updated annual PREA, pat-search, reporting, and first responder training for all facility employees including course description and a signature line for all employees attending the class.
- c. Sign-in sheets were available for all employees as well that have completed this year's annual update PREA Training.
- 3) Inmate Files I was provided with inmate's files that reflected; 1) anyone that indicated they were LGBTI (2 inmates); 2) Inmates who filed an allegation of abuse (3 inmates); 3) Intake screening that is completed on inmates upon arrival, and; 4) Medical records via the CoreEMR computer program on inmates. During this process, inmates were randomly selected from the inmate roster that was printed on the day of arrival at the facility. I randomly selected between the 5th and 8th person from each housing unit. There were two that refused to speak with me, so I randomly picked 2 more.
- a. The confidential screening records completed by the Correctional Treatment Specialists (Caseworkers) reflect those who identified as LGBTI were kept secured with the Deputy Warden of Inmate Services who also serves as the PREA Compliance Manager. The files Indicated the initial screening was completed by the counselors within 72 hours of commitment to the facility all that I reviewed were completed immediately by the Intake staff listing the date and time along with a signature. The form also indicates the inmate's responses to specific PREA related questions. The information is again discussed with the inmate (usually within 2 weeks) by the Caseworker to meet the 30-day requirement. This is also when the PREA education information/video is presented to the inmate.
- b. The intake screening is the same information as required by the PREA Standard and is the same information that the Caseworkers would review again with the inmates. This is used for their initial classification, housing placement, and program placement. During the 2nd round with the caseworker (2 weeks), the Caseworkers look for changes to the first round of questions, to see if the inmate offers a different view, maybe thinking differently since the overwhelming issues with their first day of arriving at the jail, and to see what has changed in that period. During the on-site audit, I was able to observe the booking officer complete the intake process being completed on a new commitment that was entering the facility.
- c. The documentation specifically related to the classification and CorEMR system intake information is confidential information according to both the PREA Coordinator and Health Services Administrator and not viewed by everyone. The medical information is limited to the medical department and facility management, and the classification information is limited on what can be viewed by correctional staff.
- 4) Grievances and Incident/Investigations I was provided with all investigations that occurred in the previous year (11) and reviewed their grievance policy noting that no grievances filed for a PREA violation or sexual assault/harassment. All complaints were directly filed with staff or via the hotline using the phone.

- a. Investigations I was provided a total of 17 allegations of sexual abuse that investigations were completed on over the previous year. Each began immediately following notification to staff or management at the facility and included reports from the staff member taking the report, the Lieutenant immediately began the investigation when the complaint was brought to an inmate or shift supervisor. Any sent to management was immediately given to the Captain of Investigations to address and were referred to police for criminal. Of the 17 complaints, seven (7) were inmate on inmate complaints. Three (3) were substantiated, 2 were unsubstantiated, and 2 were unfounded. There were10 filed for staff on inmate complaints. None were substantiated, 1 was unsubstantiated, and 9 were unfounded. , 2 were referred to the police for further criminal investigation. One is still pending to determine if it will be prosecuted. Each file contained finds for each if substantiated, founded, unsubstantiated, or unfounded.
- b, The facility has developed a set of "PREA Specific" forms for their investigations as well as an annual tracking number system for each complaint. They include a regular incident report if initially filed by staff, and then follow up documents specifically related to the PREA standards to keep them separately identified and filled independently from regular reports. A file is built, and all maintained by the PREA Coordinator.

C: Site Review

The facility is a direct supervision facility that was built in 2007 a one-story facility that is built to encompass all security levels and needs in one building. As a former Warden, I refer to this as a 3rd generation prototype facility that offers separate staff entrances, segregated visiting on each unit instead of mass visiting booths, and a more streamlined design allowing for only one main control room as opposed to the old 2 control room operations. The facility is built with one long common hallway with a control unit in the center and housing units on both sides. The facility is a mix of hard cell and dormitory units, and they hold both men and women. As with the new jail designed, they have a full-service medical department with positive pressure cells. Their medical wing is located on the front of the building with the cell area having windows out the front. Unlike most, this facility has the ability to hold both men and women in their medical unit, separated from each other with a common officer station in the center. With the COVID-19 pandemic upon us, they did have several individuals under medical guarantine in the area for symptoms but no known positive cases. The area was an N95 mask mandatory area. Entering the facility's main hallway at the control sally port you are in the center of the facility hallway where all housing units are located. To the left is the intake area where all acceptance and release occurs. Next is the Medical Department with medical isolation cells in the rear, followed by a general housing unit at the end of the hallway. To the right of the Control Center are the staff training/entrance areas, office area, and foodservice. At the far right end in the female housing unit that has multiple classifications in one. This unit has a hard cell area with a recreation area as well as a dormitory area to the left when entering the housing unit for lower security/work release-type female offenders. Again, standing in the middle of the hallway beside the control unit, and looking to the rear of the building is a series of seven (7) housing units from left to right with the inmate services department and classrooms in line with them. These housing units are designated for male offenders and they range from maximum to minimum security. All units have attached fresh air recreation areas, 2-multipurpose rooms, and multiple single-stall showers throughout. The hard cell units are the typical build type, and the dormitories are 6-person cubicles. The units with higher security, have a day-area directly outside of some cells allowing inmates to be out of their cells is a smaller secure area with the same privileges as larger more-inmate type areas.

The inmate services area was one of the larger I have seen throughout my career in corrections allowing for a centralized area for their caseworkers to be as well as their programs when available.

The medical department is manned by employees from Prime Care Medical, Inc. a contracted medical provider based out of Harrisburg, PA. They have received full facility accreditation through the National Commission on Correctional Healthcare and recently were recertified earlier this year. The medical department was managed by its Health Services Administrator (HSA) RN and provided medical, dental, and mental health services. They provide 24/7 medical and mental health services to all those incarcerated in the Franklin County Jail. The area consists of a full dental suite, a secure pharmacy, a reception area, multiple treatment areas, and offices. They also have a very large medical isolation area for both male and female inmates.

It was noted when moving to the female areas that all-male staff entering were announced, as was true when a female entered some of the male units we entered. The shower areas in their hard-cell units all had secure-type stainless steel doors with rubber matting installed to block visibility to anyone walking by. The dormitory unit showers all had industrial curtains installed to assure privacy when showering.

The facility has a CCT system throughout that was installed when the facility was built, with only a few extra cameras being added. The Warden indicated that he intended to gather bids for the possibility of a software and CCTV upgrade this year. All of the cameras in the facility were monitored from the control unit as well as the administrative area. Many of their cameras were programmable meaning they would run on a pre-set pattern while recording to multiple hard drives for storage. There were stationary cameras located in the hallways and in areas deemed as "dead-spots" to staff vision. Housing units had pan/tilt/zoom cameras allowing staff to explore and track incidents.

D. Interviews with Staff and Inmates

Staff - 45 total

This auditor was provided with a secure conference room in the administrative area of the facility to conduct staff and contractor interviews. This also served as the "hub" of my time there. I met with the PREA Coordinator, Compliance Manager. and Warden and randomly selected security staff made up of new and seasoned employees. I returned to the facility on Thursday evening of the audit with Deputy Warden Sullen to interview staff and managers that worked the overnight shift. All interviews were conducted utilized the PREA Staff Questionnaire for this process. The Auditor selected staff members to interview the employee roster provided. They were staff members who worked general population, relief officer, restricted housing unit, female unit, and the intake/ booking area fro all three (3) shifts at the facility. They all were trained as first responders and are mandated to provide aid under Pennsylvania law.

training/screening, Lieutenants who served as shift commanders from the first and third shifts, plus medical/mental health personnel. I was able to interview an officer working intake who was able to walk me through their intake/booking process for all inmates. I also spent some time interviewing the Health Services Administrator who runs the program at this facility, Staff Interviews by category: Random Staff 12 Specialized staff: 10 Deputy Warden – Operation /PREA Coordinator: 1 Warden: 1 Deputy Warden – Inmate Services/PREA Compliance Manager: Lieutenants/Shift supervisor: 2 Health Services Administrator (contracted): 1 Caseworker: 2 Intake: 1 First Responder: 12 Human Resources: 1 Trainers: 1 Inmates I randomly selected 20 inmates from each housing unit in the facility to interview. I also had 9 targeted

I also interviewed specialized staff such as Caseworkers who were responsible for the PREA

inmates to interview however one targeted and one random inmate refused to meet with the auditor. It should be noted that I did not have any inmates write letters to me so there weren't any to interview. I was provided with a secure and private multipurpose room inside of each housing unit to interview the inmates to assure confidentiality. Upon arrival at the housing units, there were 2 inmates that didn't want to talk to me in each unit, and others were randomly selected. The consensus with those that didn't want to talk as they didn't see a need to, one indicated that "I don't have any issues with it, so don't need to discuss it". One of the targeted inmates that had previously filed a PREA complaint wanted to discuss more legal issues he had at the jail and less about the complaint he filed. after explaining my role as an auditor, he agreed to answer questions related to his complaint. I was able to discuss the complaint and also the facility's response. Although unhappy with the facility it was noted that they fulfilled their requirements with his complaint. This was noted with those I spoke with regarding their complaints, They all reported they were notified, monitored, and met with the appropriate staff. One of the random inmates I selected indicated halfway through our interview that he had filed a PREA complaint and that nothing was done. As I questioned, he continued to insist that no one did anything. Through our meeting, he did state that they spoke to him but it was investigators and police. He further stated that he recently took a plea bargain to a sexual assault from 2 years ago at the facility. When discussing the issue with management I was provided with the investigation that was started several days before he filed his complaint because he was under investigation for a sexual assault he had committed. It was noted that he was arrested for the assault and prosecuted in compliance with the standards. He actually filed several complaints about this incident and it was believed he was attempting to avoid guilt/prosecution. As I indicated earlier he was convicted and will be serving a state sentence in the very near future. When reviewing this incident, I could see the full steps taken by the facility to investigate and follow the PREA Standards for investigation and conviction.

The remaining interviews of random and targeted inmates gave a clear view of the Jails PREA Policy and the education of inmates as well as covering the needs of those identified and also those with special needs. All inmates felt safe and comfortable with their housing, programming, and opportunities that they had at the facility. I discussed M Block housing with a few targeted and they all stated they were ok with the housing, and also the freedoms that were offered. One gentleman that I spoke with indicated this was his first time in jail and he was scored high for potential victimization. He was very soft-spoken and talked about his fear of being a first time offender. When discussing his housing, he said that the jail and the Caseworkers were very concerned with his needs. He liked his placement and the ability to move around in the unit without fear.

AUDIT FINDINGS

Facility Characteristics:

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate or resident population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

The Franklin County Jail is a County Facility in South Central Pennsylvania operated by the county of Franklin and was built in 2007. It is a one-story direct supervision facility holding pre-trial offenders, those serving county sentences of less than 23 ½ months maximum sentences, county parole/probation violators, and they have a contract for holding inmates under detention by the United States Marshals service. The Marshals inmates are pre-trial or recently sentenced awaiting placement in from the Federal Bureau of Prisons. The Jail is by Pennsylvania county code operated under a "Prison board" and operational requirements of title 37, chapter 95 of PA code that is under the review of the Pennsylvania Department of Corrections Office of County Inspections. The facility sits in a rural setting near a county industrial park.

Upon arrival at the facility, the main entrance is in the middle of the front of the facility. To the left is a vehicle garage for prisoner drop off that is attached to their intake/booking area. To the right, there is an employee entrance and receiving and mechanical area. Upon entering the facility is the lobby area of the area with a mirrored control unit directly ahead, with the administrative area to the right. The administrative area consists of several management offices including the Warden and Deputy Wardens. Across this area is a door entering the employee entrance hallway, including locker rooms and a staff dining area, and a door into the secure central corridor. The housing units of the facility are built off this long central corridor with locking slider-type doors station in the hallway to assure security and not a fully open area. Access to each housing unit, medical, and food service is off of this main hallway. Every housing unit entrance has an outer and inner door (sallyport) to assure double lock security for each unit. To the left of the control unit are general population housing units and the medical department with medical isolation area. There is a locked corridor there as well going back to the front of the facility into the intake/booking area of the facility. This area has individual and group holding cells, a search area, a property room, booking equipment, and a body scanner. This area also has a secure exit to the lobby area. Back at central control in the main hallway, is the Inmate Services Department and male housing units lining the back of the facility from left to right. To the far right is the food service (kitchen), mechanical areas, and the female housing unit that incorporates multiple security levels in one unit...from a dormitory to disciplinary confinement cells. The facility dorms that are on the left of the facility with hard-cell units are set up with 6-man cubicles. All the housing units are set up with housing on the perimeter, centralized day are and rear fresh-air recreation allowing for an optimal view and observation by the staff of the individuals housed there.

All "hard-cells" had their own water closet for use by one or two inmates depending on the number housed there. They had individual shower stalls with grate doors one each. These doors had rubber sheeting and steel plating the allowed for body covering, only seeing the individual's head or feet. The dorm areas had bathroom stalls like a public restroom would have. Their showers were less secure not using doors, but full-length shower curtains for privacy.

Even the more secure units had a more-open floor plan, similar to that of the general population units. they had a hallway enclosure that ran the length of the cells on each side to allow for the 2nd layer of security as well as mini-dayrooms for a more controlled environment. This allowed the facility to separate individuals more but still offer safety and security to each.

As stated earlier, the facility is a direct supervision facility where a set number of cells exist in a housing unit with an officer assigned directly in the unit. This unit is designed to meet the needs of the inmate without leaving the area. The facility has 9 housing units, one of the single cells, 5 double celled, and 3 dormitory-style units. All have essentially the same design with an elevated officer station immediately inside the door looking out toward the rear recreation area and the cells to the left and right, offering optimum supervision of the inmates. The facility allows a group of inmates to prepare meals in the kitchen under the constant supervision of both foodservice contractors, correctional staff, and the CCTV system.

AUDIT FINDINGS

Summary of Audit Findings:

The OAS will automatically calculate the number of standards exceeded, number of standards met, and the number of standards not met based on the auditor's compliance determinations. If relevant, the auditor should provide the list of standards exceeded and/or the list of standards not met (e.g. Standards Exceeded: 115.xx, 115.xx..., Standards Not Met: 115.yy, 115.yy). Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:	4
Number of standards met:	41
Number of standards not met:	0

This will be the 2nd audit completed on the Franklin County Jail. Since that point, the facility has used the audit process and the PREA Standards to advance its facility and operations. In discussions with Jail Management, they have used the information from their last report and their investigations to adjust jail operations, evaluate potential blind spots for additional camera placement, provide proper screening tools for all inmates and assure the overall safety at the jail.

The facility has developed the use of "PREA Specific" forms for their investigations and screening processes. These forms have become commonplace at the facility and are used daily. Through this process, they have advanced their ability to respond and manage a potential crime scene while providing care for a potential sexual assault victim. The agency had 17 allegations filed over the past year and all were investigated through the process set at the facility, with one remaining open in the hands of law enforcement awaiting final disposition. Interviews with staff revealed they could explain the PREA standards in how they related to zero-tolerance, their duties as first responders, reporting duties on behalf of an inmate, or someone reporting on behalf of someone else. Their training records indicate that all staff receive initial training and also update training annually instead of bi-annually as the standards indicate.

When interviewing inmates, they could easily explain that they were given information on multiple occasions after being processed at the facility at booking, by medical staff, and when meeting with caseworkers. They also all could tell me where information was located in the units and on the housing unit electronic tablets, as well as how to use the PREA Hotline and other ways of making a PREA complaint. One concern some of them had that was shared with Jail Management was the transferring of paper documents over to electronic documents through the inmate tablets. Some of the inmates had concerns that they could not file anonymously as they had to log into the tablets. The facility still has paper forms in play at this point and that was discussed as well. The hotline number is also a toll-free call that is not monitored on the jail end so it is unknown who made the complaint if the inmate does not want to give their name. We discussed this during my closeout to make management aware if an all-electronic system was used in the future.

Medical and mental health services were provided by a contract provider, Prime Care Medical. The Health Services Administrator (HSA) was very informative as to their role at the facility to provide 24/7 medical and mental health services. They had a very good system in place for gathering PREA information from each inmate at intake and worked with the facility to assure proper screening, placement, and assistance to all inmates. Prime care has its own comprehensive PREA policy and trains its staff above contractor training, using Relias online training portal for all their employees. The medical department maintains records on a correctional medical database called corEMR. Medical staff were all very versed in the facilities protocol for responding to a PREA abuse allegation and contracted with Chambersburg Hospital for emergency medical service and SAFE/SANE services.

In summary, it is this auditors' findings that the Franklin County Jail is in full compliance with the PREA Standards and have exceeded standards in these four (4) areas; 115.22, 115.35, 115.71, and 115.86. In meeting with the Warden, Deputies, and other staff, there is a clear understanding of the standards and the facility's duties in managing under those standards. The facility is in compliance and no corrective action is required by the facility.

Standards

Auditor Overall Determination Definitions

- Exceeds Standard (Substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)
- Does Not Meet Standard (requires corrective actions)

Auditor Discussion Instructions

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.11 | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

Auditor Overall Determination: Meets Standard

Auditor Discussion

- 1) Pre Audit Questionnaire
- 2) Franklin County Jail PREA Policy
- 3) Interviews with Staff, Inmates, and Upper Management
- 4) Jail organizational Chart
- 5) Observations made during the on-site audit

a.

This Auditor reviewed the jails comprehensive PREA Policy that mandates a zero-tolerance policy that prohibits all sexual contact, sexual abuse, and harassment between inmates and with employees/volunteers/contractors. The policy indicates defines any contact as a violation of zero-tolerance and there is no consensual contact. The policy shows detection and prevention through several methods including Self-Protection, Prevention/Intervention, Reporting Procedures, Treatment and Counseling, Protection Against Retaliation, and Disciplinary Actions for making false allegations. This is done through what is deemed as their inmate orientation and education program by using their initial screening, multilevel assessments occurring after the inmate's initial commitment, Interview with the Caseworkers as well as Medical personnel, and throughout their stay at the facility via the use of the inmate tablets in each housing unit.

During the site walkthrough the zero-tolerance policy was noted and when speaking to inmates they all could tell me that the facility had a zero-tolerance policy and describe it. The same was true for staff, they all indicated that they received initial training on the policy and receive refresher training as well.

Inmate files along with documentations sent to this auditor verified that all inmates receiving education on the policy as did the training records signed off on by staff for initial and update training.

The policy is included in the inmate handbook and staff training information provided to this auditor.

b. & c.

The PREA policy spells out the position of PREA Coordinator is assigned to that of the Deputy Warden of Operations James Sullen and the PREA Compliance Manager to Deputy Warden of Programs/Inmates Services to Michelle Weller. Both deputies have 20+ years and the experience necessary to successfully manage PREA at this facility. They work closely with their staff, Warden, and inmates alike to assure compliance with the standards.

Franklin County does not operate multiple facilities, only having this one jail.

Both Deputy Wardens are established in the facilities organizational chart, answering directly to the Warden. Each plays specif roles with PREA but work closely in the management and updating of the policy and standards.

Summation

Evidence provided in the pre-audit shows a well written zero-tolerance policy and the steps the facility has put into their documentation. During the onsite audit, signage was visible throughout the facility. While conducting interviews, all personnel and contractors could actively articulate the policy and quote specifics back to me. The inmates as well showed an understanding and were able to describe aspects of it and indicated their knowledge of where the information is in the housing units and indicated that they receiving information related thereto. Files showed training records for staff and intake documentation/counselors documents reviled the inmates were educated as well.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.11 and all aspects therein. There is no corrective action required.

115.12 Contracting with other entities for the confinement of inmates **Auditor Overall Determination:** Meets Standard **Auditor Discussion** 1) Franklin County Jail Pre-Audit Questionnaire Interviews with the Warden, PREA Coordinator 2) 3) Copies of contracts with various county agencies for housing 4) Copies of the US Marshals contract for the confinement of Inmates at the Jail a. The Franklin County Jail has contracts in place with four (4) different Pennsylvania County Jails (Armstrong, Indiana, Butler, and Centre) to hold inmates if necessary. Each of these contracts includes a clause stating that the agency holding for Indiana County is PREA compliant and has received certification under the audit process as well as reporting to Franklin County for their annual reports. Each of the facilities contracts have been updates in late 2019 or early 2020. Each contract clearly outlines the requirements noted in the standards, and manage was able to discuss each contract and the PREA requirements that have been established with each facility. Summation Franklin county was proactive with entering into multiple contracts to address any overflow or court-related housing needs with multiple counties for housing. Their contracts are well defined and documentation provided indicates sufficient information is provided to them as

needed. The contracts are all up to date being signed within the past eight to ten months.

Based on available evidence and analysis at the facility this auditor has determined that the facility meets the standard 115.12 through its diligence in proactively securing multiple contracts with multiple agencies. There is no corrective action required.

115.13 Supervision and monitoring **Auditor Overall Determination:** Meets Standard **Auditor Discussion** 1) Pre-Audit Questionnaire 2) Facility Staffing Policy 3) Facility PREA Policy; Announced rounds 4) Interviews with the Warden, PREA Coordinator 5) Interviews with Major, Lieutenants, Officers 6) Facility organizational chart 7) Observations while completing the onsite audit 8) Pennsylvania Title 37, Chapter 95 – Operations of County Jails 9) Unannounced rounds logs 10) CCTV system placement and viewing 11) The American Correctional Association Standards for Adult Local Detention Facilities a. This Auditor met with Warden Bechtold to discuss their staffing plan. The Warden discussed their quarterly and annual of their staffing plan with both Deputy Wardens to assure proper staffing. As with other county Jails in Pennsylvania they work in the guidelines of Pennsylvania's Title 37; laws governing county jails as well as the review of ACA Standards for local detention facilities. In a review of their information, they conduct quarterly reviews of staffing to assure adequate numbers of staff are available as needed. The jail uses all full-time staff and is in the process of interviewing and hiring now. Their review indicates that they have 19 posts to fill to assure adequate staffing per shift per day. They calculate in off days, vacation, sick, and misc. days as well as extraordinary occurrences that may arise throughout any given time and plan their plan accordingly. The PREA policy refers to the facility staffing policy to provide for adequate staffing levels to assure safety and security for all inmates to provide sexual abuse/harassment free-facility. In a discussion with the Warden, he did indicate that CCTV is taken into consideration with

staffing plans and that they are in the works to have full facility CCTV upgrade. in their staffing meeting, they have identified areas where they would like to add cameras for both PREA security as well as physical plant security. The Warden indicated the video recording is

considered part of their staffing, but staff numbers are not reduced when considering existing cameras or any additions. According to the Warden, the cameras have been used as an investigative tool as a "look back" into allegations and as evidence in the cases.

We further discussed staffing in relation to supervisors. The Warden indicated that they have 13 Lieutenants that cover all shifts 24/7. with the larger number of supervisors, they always have managers at the facility. In the past month, the Captain at the facility was promoted to Major and a new Captain was promoted out of these ranks. They were conducting Lieutenant interviews while I was on site.

According to the PREA Coordinator, the facility is not under any kind of consent decree and has had no findings of inadequacy. They have achieved accreditation through the National Commission on Correctional Healthcare and are 100% compliant on their last inspection from the PA Department of Corrections office of County Inspections.

The facility does look at staffing ratios for the program at the facility. The Warden indicated that all program is done on daylight and evening shifts during the week thus the staffing for both shifts is the same. This was also discussed with the inmate population when conducting my interviews. It should be noted that many programs are not occurring at present due to the COVID-19 pandemic, something that will be indicated throughout my report.

Through my interviews, it was indicated that the facility has taken into consideration previous incidents when reviewing staffing and placement of video monitoring. It was noted earlier that the facility has a CCTV system with ample coverage throughout the facility as well as the Wardens indicated they were due for an upgrade to the entire system and were in the planning phases of that upgrade.

b.

The Warden indicated that there is no deviation from the staffing numbers. They facility through their collective bargaining unit agreement and facility policy for staffing require the minimum number of staff be met. If necessary they will force staff overtime. If a shift is short, they will call someone on the overtime list or if not available forces someone from the previous shift to stay and fill thus never deviating from the plan. The same is true for management...if a Lieutenant would report off, someone would be in place to cover, someone brought in, or the existing would be forced to stay.

C.

This auditor discussed the review of staffing with the Warden and the PREA Coordinator. Both indicated that staffing is reviewed annually in accordance with the PREA standard. This auditor was provided with a quarterly review dated February through April 2020 with a complete breakdown of needed man-hours as well as factors that play out in determining that final number. No recommendations were made on staffing or video monitoring that was made during this review.

d.

This Auditor reviewed housing unit logs and facility PREA policy that mandates for

Intermediate or higher-level management to make unannounced rounds on at minimum monthly. This auditor was provided with a sampling of housing unit logs that indicated that rounds were completed and there is also a section to denote any PREA concerns during that period. I did note that when on a few housing units, the log was marked daily by different supervisors and at different periods for their unannounced rounds. The rounds were occurring more frequently than required by the standard and policy and occurred at different times throughout each shift as well as on all shifts including the overnight shift. The PREA policy indicates that staff is not permitted to notify others of the rounds occurring. I did discuss the issue with a Lieutenant on the evening shift who indicated that they all make rounds and do it without creating a pattern of a time of day. Inmates interviewed indicated that they do see the Lieutenants in the units all the time and on all shifts.

Summation

The Franklin County Jail PREA policy and Staffing policy provide for standard-specific policy to meet the components of this standard. They utilize both state and federally accepted standards for staffing standards and have pro-actively adjusted video monitoring in relation to previous abuse/harassment findings. The Lieutenants always assure that staffing if filled in relation to policy, as well as providing announced rounds on a rotating basis on all shifts.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.13 and all aspects therein. They have placed a large amount of detail into staffing to assure full numbers as well as a detailed report outlining exact staff hours available at all times. No corrective action is required.

115.14 Youthful inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

This auditor gathered and retained information from the agency that provided evidence for this standard:

- 1) Pre-Audit Questionnaire
- 2) Interviews with the Warden, Deputy Warden of Operations, and Corrections Officers
- 3) PREA Policy
- 4) Facility tour of the housing area

a, b, c.

The Franklin County Jail does house youthful offenders that are under confinement for Franklin county called "direct-file" case in accordance with Pennsylvania law. Youthful offenders charged in "aggravated" circumstances like homicide are charged as adults and placed in the jail if they cannot post bail or have been sentenced to serve their time in the county jail. At the time of my audit, there were no youthful offenders and the facility had only housed 2 throughout the previous year. The facility uses M Block, which is a larger unit broken down into separate areas that are mainly used for quarantine of inmates before classification and housing assignments. These areas in this unit are segregated from each other with day areas off of 2 to 3 cells. The section in Franklin county allows for sight and sound separation from any adult inmates that would be on quarantine. In interviewing with management and line staff, they all indicated that when a youthful offender would be moved, it was done with a few specific rules. First, no adults could be out and have direct contact, and any movement outside the unit required correctional officer custody and hallways cleared from all other offenders.

The PREA policy outlines how youthful offenders are house spelling out sight/sound separation in housing, showers, programs, and recreation. The Deputy Warden and a Lieutenant both described how they are handled and moved in the facility to avoid contact with adults. We further discussed the ability of those offenders to have access to programs, counseling, and potential work assignments. Most recently ALL offenders at the facility have not been attending programming due to the COVID-19 pandemic and a reduction in movement throughout the facility.

At present, Franklin County does not contract with any other agencies to hold their offenders nor do they contract out to house youthful offenders elsewhere.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.14 and all aspects therein. There is no corrective action required.

115.15 Limits to cross-gender viewing and searches **Auditor Overall Determination:** Meets Standard **Auditor Discussion** 1) Franklin County Jail Pre-Audit Questionnaire 2) Facility PREA Policy 3) Facility Strip Search Policy 4) Inmate Handbook 5) Interviews with Staff, Management, and Inmates 6) Form "Cross-gender strip search validation form" 7) Form 100.29-15 "PREA Booking Questions" 8) Inmate intake screening, form 100.30-16 9) Observations while completing the onsite audit 10) Facility Training record and curriculum a. Auditor reviewed the facility's PREA policy that indicates the no one is permitted to conduct cross-gender strip searches or cross-gender body cavity searches unless preformed in exigent circumstances or by the medical personnel. The policy describes "same-gender" patsearches and strip-searches if gender identity is known. This was also discussed with staff members who all indicated that they do not conduct any strip-search on opposite sex inmates. Officers explained that they have male/female staff required on all shifts and will for example call for a female if a new female commitment is brought into intake. During my interviews with inmates, they all indicated that they were never stripped searched by or in front of a staff member of the opposite sex. Females for females, males for males. b. The facility polices state that males are not permitted to search females and this was noted by both staff and inmates interviewed. When discussing searches of females with male corrections officers, they all indicated they are not permitted to do any search of their person and a female officer would be requested. The policy and inmate handbook offers equal opportunities to program for both male and

female inmates. When I questioned several of the female inmates about programming, they

all indicated they had the opportunity to attend classes and were never refused because of a lack of female officers. All did indicate that there is always a female officer available. When pressed on the issue they said even if one isn't in an area like intake, one will come within like a minute. This was also noted when speaking with both male and female corrections officers. They stated they have multiple female officers available each shift to assure coverage. Supervisors also advised that if there would be an issue, one would be mandated to stay. It should be noted that inmates did mention that they haven't had to worry about movement as the COVID-19 issue has stopped gatherings and movements to various locations.

C.

The facility PREA Policy indicates that ALL cross-gender searches must be documented and with management approval. The facility has developed a form, the "Cross-gender Strip Search Validation Form" form for any incident. When there is someone who indicates they are transgender and requests a search by a male or female, the form is used and management is present for any approval. The facility was able to provide evidence of this document being used over the previous 12 months for transgender commitments requesting a male or female to conduct their search. The document provided specific information on the individual's concerns and whom they wish to search. None of these individuals were available at the facility during my audit to discuss the issue.

d.

PREA Policy indicates that "all inmates have the ability to shower, perform bodily functions, and change their clothes without members of the opposite gender to view their buttocks, breasts, or genitalia except in emergency situations". This is followed by a mandatory policy to announce cross-gender staff entering a housing unit without an announcement.

During my interviews with inmates most indicated that men and women entering a housing unit of the opposite gender are announced. When questioned further, all inmates shared that the facility announces after shift change that male and female officers or staff may be moving in and out of various units to prepare them. When I asked the staff the same question, they all indicated that they do announce. When questioning inmates several said older staff do, but some of the younger don't always announce. During my rounds, it was notated that any time I saw staff entering of the opposite sex, the would announce their presence.

This Auditor took note of all the shower areas in the facility. A vast majority of the showers had stainless steel doors with metal grating on top and on the bottom. The facility has added rubber to the doors that allow for a view of only the head and feet of anyone using them. In the dormitory units, their showers had floor-length shower curtains that provided for complete coverage of these single stall showers.

e.

According to the PREA Policy, the Franklin County Jail will not pat search or unclothed search anyone identified as transgender or intersex inmate to determine genital status. Questions #3, and #4 of the initial PREA Questionnaire ask directly what was your sex at birth and what describes your gender expression. All inmates receive as soon as they are committed to jail. Officer interviewed indicated that they would not search someone to determine status and would proceed to the series of questions, refer to the Lieutenant and medical department

should they not answer. Medical personnel at the facility when questions stated that they would also assist with questioning and if necessary look into the individuals' medical history and physicals through medical providers.

f.

This Auditor was provided with signed PREA training logs from their annual training that was conducted in November 2019 as well as the training materials used (from the PREA resource office). All officers interviewed could explain both the training process and the procedure in completing this task.

Summation

Staff members including the PREA Coordinator were able to verbalize the components of this standard. In discussions with inmates, they did not indicate that the process was intrusive to them through searches or when showering, changing or using the bathroom. They all indicated they were comfortable and safe in the process. The development of the forms to track any searches, and the fine-tuning to assure that all pat searches are less intrusive with the ability to properly assure security is noted. Staff and inmates alike showed no signs of problems with the system and appeared to be more comfortable in the process.

Based on available evidence and analysis at the facility this auditor has determined that the facility meets the standard 115.15 and all aspects therein. There is no corrective action required.

115.16 Inmates with disabilities and inmates who are limited English proficient

Auditor Overall Determination: Meets Standard

Auditor Discussion

Items used by the auditor to review the standard:

- 1) Franklin County Jail Pre-Audit Questionnaire
- 2) Facility PREA Policy
- 3) Language Line contract (2019 through 2024)
- 4) Inmate Handbook
- 5) Interviews with Case Worker, PREA Coordinator, Health Service Administrator, and Officers
- 6) Training documents
- 7) Inmate intake screening
- 8) Offender handouts, flyers, postings, tablets

a.

This auditor reviewed the comprehensive PREA Policy that addresses each specific of the standard and how the jail will handle disabilities to assure the inmate is free from abuse/harassment. The policy indicates that one on one orientation will be done with an individual identified as having a disability. The PREA Compliance Officer and Case Worker indicated that staff would work independently with an individual inmate to provide necessary assistance from outside agencies to assure they understood and could comprehend the information.

The facility has a contract with Language Line to provide various languages as needed. The Case Worker also indicated that the inmates' services department along with the medical department would assure each inmate receive the training and understood. the HSA from Prime Care Medical also indicated they have a great relationship with the facility's caseworkers to share information on those that may need some extra help in the area.

During my interviews with the facility Counselors they indicated that they would work with the inmate one on one to assure, 1) they were able to understand and comprehend the information provides, 2) answer any questions they would have, and 3) evaluate the individual for housing assignments to assure that their disability or language barrier would not make them vulnerable. The PREA screening form that is used by the counselors provides an area for the counselors to discuss any disabilities or barriers and make recommendations on their housing assignment.

The PREA Secrining form also directly asks if there are any physical disabilities as well as psychological or mental health concerns. The same is true for the medical department and their screening.

b.

The facility provided this auditor with copies of documents in both English and Spanish. They have a contract in place with Language Line, Inc. to provide interpreters for those who are not English proficient and will also provide sign language services for those deaf/hearing impaired. The caseworkers have the ability to use these services with the inmates in a confidential environment. Because all inmates are seen through the intake, the caseworkers, and medical these use countermeasures assure that all inmates are seen and interviewed in the appropriate manner to provide language services.

C.

According to the PREA questionnaire and discussions with the PREA coordinator, inmate interpreters have not been utilized in the past year. Although some staff members when interviewed said they could use interpreters, they could not give examples of the use and all did indicate that they have Language Line in place to use the phone if there was a language issue.

Based on available evidence and analysis at the facility this auditor has determined that the facility meets standard 115.16 and all aspects therein. There is no corrective action required.

115.17 Hiring and promotion decisions

Auditor Overall Determination: Meets Standard

Auditor Discussion

- 1) Franklin County Pre-Audit Questionnaire
- 2) Franklin County Jail Employment application (web)
- 3) Franklin County HR Department and interview with Director
- 4) Interview with Deputy Warden of Operations
- 5) Interview with the Warden
- 6) Facility Policy for background checks of employees, contractors, and volunteers
- 7) PA Crimes Code, Title 18
- 8) Completed criminal history checks

a.

The Auditor discussed with the Warden and Deputy Warden on their hiring practice. They indicated that before all interviews are conducted with potential employees the complete the Franklin County Jail employment application and are required to provide personal identification information for a complete criminal history background check to be done. Before anyone would be interviewed all potential employees, criminal history check is completed by the Human Resources Department per jail and county policy. Those not passing are denied an interview and employment. This process is spelled out in the PREA policy as well as the county's hiring policy.

Deputy Warden Sullan and I were able to travel the county HR Department and meet directly with their director who was able to explain the county's process for all applicants that they ensured that a background check was completed on everyone, and again every 5 years per policy.

The Warden indicated the same procedures apply to any contractor under their PREA Policy. The policy indicates that all contractors and volunteers entering the facility will have to have a criminal history check completed and be approved prior to entering the facility. As with employees, this auditor was provided with documentation of updated backgrounds being completed on those individuals coming into the facility.

b.

The Warden indicated that sexual harassment is viewed in the same manner and they will not hire nor promote and individual. When questioned on disciplinary issues such as sexual harassment from and employee on inmates, He referred to their PREA policy noting that with

the zero-tolerance policy and staff disciplinary standards, that no one would be promoted.

The same is true for any contractor or volunteer, the process involving training them and conducting background would apply to make them ineligible to be in the facility.

C.

The agency conducts criminal history checks on all potential employees before hiring anyone. Part of this application process according to the PREA Coordinator and policy would gather identifiers on everyone for the check to be completed. This is mandatory for all applicants.

d.

According to the PREA policy and confirmed with the Warden and Deputy, all contractors are required as the same as an employee to have a background check done as if they were being directly employed by Franklin county.

e.

Jail policy indicates that all employees will have a new criminal history check performed every 5-years or sooner. These are also performed by the HR department of the county. This auditor was provided several personnel files upon request to review that indicated the checks were completed and listed the results of the check.

f.

Upon review of the policy on background checks, the facility indicates that screening is used with direct questioning to the potential employee of any previous misconduct or criminal activity that is in violation of section 115.17. The Warden and both Deputy Wardens indicated the same during their interviews.

Under PREA policy and via the collective bargaining unit agreement, all employees are required to report any issue, criminal charge, etc. related to this standard and also any other criminal charges that may have been filed on them. "full disclosure" is indicated.

g.

In discussions with management at different times, they all indicated that "omission" would be considered grounds for discipline up to and including termination. In discussions with Human Resources, it was noted that omission would be viewed as lying and then be a violation of their employment status.

h.

According to Deputy Warden Sullen, the County HR Department does report to other agencies on anyone who would have had a substantiated allegation. They both stated during their interviews that the county would in most cases prosecute the individual and including termination. If another facility was conducting a background check they would provide information and both indicated that they hoped that agency does the same for other facilities.

Summation

The Auditor was able to compare the data provided by those interviewed to the policy on hiring, promoting, and background checks. That data along with the personnel files provided gave a clear view into the practice showing that the agency is compliant with the standard. It was clear when analyzing the information that they work to assure compliance with the standard and also Pennsylvania law.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.17 and all aspects therein. There is no corrective action required.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1) Pre-Audit Questionnaire
	2) Franklin County Jail PREA Policy
	3) Interviews with Warden and PREA Coordinator
	4) Facility tour
	Summation
	Through a visual walkthrough of the facility and interview with the Warden and PREA Coordinator, it is apparent that the facility is committed to addressing the safety of the inmates. The facility is considered "New" in its age and design. Only 11 years old, the Warden indicated that they are looking to complete a CCTV system upgrade either later this year or next. the facility is organized, clean, and the security systems are of a newer operating facility. They complete facility reviews and also look at any incident for corrections to the facility including operational changes to assure safety.
	Based on available evidence and analysis at the facility this auditor has determined that the facility is in compliance with standard 115.318 and all aspects therein. There is no corrective action required.

115.21 Evidence protocol and forensic medical examinations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Items the auditor referred to and maintained for this standard:

- 1) Pre-Audit Questionnaire
- 2) Facility PREA Policy
- 3) Interviews with Warden
- 4) Interviews with PREA Coordinator and Major handling investigations
- 5) Discussion with Pennsylvania State Police and their investigative standards
- 6) Hospital SANE/SAFE program
- 7) Franklin & Fulton Counties Womens In Need Program Victims Advocate
- 8) Interview with Prime Cares Health Services Administrator (HSA)

a.

The Auditor discussed investigations with both Warden, Captain, and the PREA Coordinator. They indicated that all criminal investigations are handled by the Pennsylvania State Police, ChambersburgBarrack. They, according to their policy and through their interviews discussed their role to complete the administrative part of the investigation. I spoke with the Criminal Investigative Unit at the barracks on 2 different occasions. They advised that they would handle all such criminal investigations at the Franklin County Jail including any PREA issues. Their investigative protocol is based on the most recent DOJ standards in conjunction with PSP standards.

Major Smith, who was recently promoted from Captain handled all internal investigations for the Franklin County Jail. He has completed the PREA Investigators Training offered by the Pennsylvania Department of Corrections. He is also the facilitator for investigations and the liaison between the Jail and the State Police investigators.

b.

The investigative protocol is developed to take into account the needs of juveniles, however there were no youthful offenders at the facility at the time of the audit.

According to the Major, the protocol used for investigations was that offered in the PREA Resource Center Investigators training. the State police follow that of their departments

mandate for all criminal investigations that are also noted in the standards set by the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents,".

Through our discussions, it was noted that the Jail handles the administrative end of investigations, this is noted in their PREA Policy. The PREA Policy established a standard for evidence protocol allowing the Auditor to determine the Agency provided information and training to their first responders to secure the scene and physical evidence. The staff training policy for "first responders" addresses proper methods as well (scene security, clothing, no washing, etc.). During interviews with staff (all levels) they could explain these steps back to the Auditor when asked.

C.

This auditor reviewed the PREA Policy and documentation from the Franklin & Fulton Counties Women In Need Program provided by their Executive Director Barbara Channing to provide victims services for all Franklin County Inmates. The policy details that any victim of an alleged sexual assault will have access to a full medical examination. The PREA Policy and inmate handbook indicate that all medical services are completely free to them should they need it. This was also vocalized through discussing with the Health Services Administrator, PREA Compliance Manager, and PREA Coordinator.

The pre-audit questionnaire indicated that the Franklin County Jail used the Chambersburg Hospital that that offers both SANE and SAFE staffing and examinations at their facility. This was confirmed during my conversations with the HSA, PREA Coordinator, and Major. I was able to speak with a hospital representative and they confirmed that both programs were in play at their facility and offered to anyone including the Jail.

d.

The facility has an agreement with Franklin & Fulton Counties Women In Need, Inc., a private non-profit agency providing victims services/advocate to both Franklin and Fulton Counties. They offer victim advocate services to any and all victims at the facility. they also offer counseling programs in and out of the facility as needed as well as operating a separate 24/7 hotline that is available to inmates as well. As soon as contacted by the jail, they would have someone on site ready to assist.

e.

As noted the Women In Need, Inc. program provides a full-service victims advocate and accompanies all the victim through any medical exam, provides rape counseling, and also support during criminal proceedings.

Summation

In reviewing the jails policies, interviews, and review of the documentation involving the Pennsylvania State Police, The Hospitals SANE/SAFE programs, and Women In Need, Inc. I was able to see the program working as a whole to properly investigate as well as providing all the necessary services to any victim should there be a need. All parties could spell out necessary steps in an efficiently organized manner to assure proper care in both an investigation and necessary medical and support services for a victim inf needed.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.21 and all aspects therein. There is no corrective action required.

115.22 Policies to ensure referrals of allegations for investigations

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

- 1) Pre-Audit Questionnaire
- 2) Facility PREA Policy
- 3) Inmate handbook
- 4) Interviews Warden, Deputy Warden/PREA Coordinator, and Major
- 5) Franklin County Jail PREA Investigations and documentation provided
- 6) Information provided by the Pennsylvania State Police

a.

The Auditor reviewed the PREA policy, inmate handbook, and information from the criminal investigative unit from the Pennsylvania State Police when reviewing this standard. The policy states that all allegations of sexual abuse/harassment are reported immediately to the PREA coordinator. Those of Abuse will be immediately reported to the PA State Police who serve as criminal investigators. The PREA Coordinator will report to the Warden, PREA Compliance manager, and Major and will start their process, using forms developed to manage each case. Each case is then assigned a tracking number.

PREA Policy outlines the initiation of the process, in multiple steps for the administrative investigation assuring timelines, collection of information, and the review process. The committee will see the investigation through in its entirety, as well as conducting weekly management meetings to review the status. I was provided with a sampling of five (5) investigation packets from the past year. Each sample followed the steps outlined in the policy.

b.

According to the PREA policy it lists that any incident of alleged sexual abuse/harassment will be investigated completely and referred to the PA state police should they be criminal for prosecution. When speaking with management the all indicated that the policy is followed completely and PSP is brought in on all suspected abuse cases. This was also noted while conducting my interviews. I selected an inmate who recently took a plea bargain to a sexual assault that occurred a few years ago. When speaking with him, staff, and reviewing the case with management I was able to identify the investigative process that was followed in accordance with the PREA Policy and standards.

C.

In the review of the PREA Policy, it does indicate that the PA State Police will handle all criminal investigations at the facility and does refer. In discussions with various people, it is clear that they have a long-standing relationship between agencies. I was able to see a case that was referred to PSP and was completed through the criminal justice system resulting in a

conviction.

Summation

The auditor was able to see that the PREA policy, forms utilized, completed investigative packets as well as the agreement with the PA State Police. Through my interviews, I could see the process that was being completed and see how it followed the PREA Policy and standards as required. The facility did have an exceptional team process in play with a weekly management meeting to assure all investigations were completed in line with the policy. Their reports were very clean and they have developed forms to track all phases from the initial report through to the notification of the inmate. By conducting such intense reviews, they assure that things don't "slip through the cracks".

Based on available evidence and analysis at the facility this auditor has determined that the facility exceeds compliance with standard 115.22 and all aspects therein. There is no corrective action required.

115.31 **Employee training Auditor Overall Determination:** Meets Standard **Auditor Discussion** Pre-Audit Questionnaire 1) 2) Jail PREA Policy 3) Franklin County Jail Training Policy 4) Franklin County Jail Staff Education Verification Form 5) PREA Powerpoint Training slides 6) Training files reviewed on-site and maintained 7) Interview with PREA Coordinator, PREA Compliance Manager, and Warden Interviews with various staff members 8) a. The Auditor was provided with PREA Training documentation during the pre-audit phase to review including the "staff education verification form" that all staff members complete for each training they receive. The training curriculum includes information on the jails zero-tolerance policy, first responder requirements, and reporting protocol. These specialized PREA training programs are spelled out throughout the PREA Policy and training manuals.

According to staff during interviews, they could articulate training the received on zero-tolerance, how to identify potential abuse, how to report, and detect abuse/harassment. They could also recall the rights inmates had to be free from abuse/harassment and also free from any retaliation should they report. They explained ways that they were information on speaking with someone who would identify as LGBTI.

I discussed training with management and the all explained that annual PREA training is provided to every employee, and the annual training the medical staff have to receive through their own PREA policy. We discussed the annual training, and they explained that it covers the dynamics of sexual abuse/harassment in a correctional facility and what signs to look for in this type of environment. Staff was also able to explain the training back to me in relation to abuse/harassment in a correctional environment.

When hiring new employees, the facility mandates that each receive basic training including the PREA training before they begin working in the Jail.

b.

When reviewing the policies and training curriculum it was noted that the training was not gender-specific, but instead tailored to a facility holding both men and women as a county jail does. According to the PREA coordinator, all employees receive the same training, no matter their gender or job assignment so they have the ability to work at various points in the facility. Because there is only one facility that holds both men and women, staff do not require training for a gender-specific facility.

C.

As indicated earlier no staff will be permitted to wor with inmates until they receive basic training that includes PREA training. The facility does an annual update PREA training for all staff and this was noted and documented.

d.

Included in the training records I received during the pre-audit and during the on-site review they had training materials with dates and signatures for all employees for annual training and I was able to review files for initial training showing those signatures as well.

Summation

The Auditor was able to review the documentation that shows that employees were required to receive their initial PREA Training before working with inmates and covered all necessary requirements. Each employee also received annual updates pre-scheduled annually instead of bi-annually. The staff could articulate what they received and how it applied to their duties and the inmates' rights to be free from abuse/harassment and retaliation. During my interviews with staff, they all could explain the training and the rights afforded to the inmates under the PREA standards

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.31 and all aspects therein. There is no corrective action required.

115.32 Volunteer and contractor training Auditor Overall Determination: Meets Standard **Auditor Discussion** 1) Pre-Audit Questionnaire 2) Jail PREA Policy – volunteer/contractor training 3) Volunteer/Contractor Education Form 4) Training files reviewed on-site and maintained 5) Interview with facility contracted medical and food service staff 6) Interview with PREA Coordinator/PREA Compliance Manager a. This auditor reviewed the jails PREA policy and interviewed contractors working in the jails medical department and also the food service department. Both services are contracted to outside vendors. I was unable to interview any volunteers due to the restriction on entering the facility due to the COVID-19 pandemic. All contractors and volunteers working or providing programming at the facility are mandated to complete PREA training. the policy goes into depth for the amount of contact, requiring more training and more often for those with a higher level of contact and a scaled-back version for say a volunteer that only comes in once or twice a month. The policy also explains similar requirements for medical contractors.

In discussions with the PREA coordinator, and PREA Compliance Manager this training is offered as needed to volunteer and contractors coming into the facility. As noted above, the training is given as required every 24-months but is also given annually for those volunteers and contractors that have contact with inmates more often and on a regular basis.

According to the PREA policy, the PREA coordinator or designee will receive training on their zero-tolerance policy, the dynamics of the PREA standards, their duties on reporting, etc. It specifies that additional training is mandated for contactors/volunteers who are at the facility on a regular or full-time basis that will mirror staff training and be completed annually just like those employed there.

When speaking with the medical staff members they said their corporate office mandates PREA training annually as well through the Relias Training portal. They also explained that they received the full jail training on top of their training requirements from Prime Care.

C.

During the pre-audit and while on-site, I was provided with training files and sign-in sheets that were kept for all contractors/volunteers on the "Volunteer/contractor education form".

Summation

The Auditor was able to connect the agencies' PREA policy, training standards, and the vocalized information from the contractors to meet the components of this standard. The contractors were able to articulate the training the received that met the standard. The facility had all the necessary documentation to show the training was given in compliance with the policy and PREA standards.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.32 and all aspects therein. There is no corrective action required.

115.33 Inmate education **Auditor Overall Determination:** Meets Standard **Auditor Discussion** 1) Pre-Audit Questionnaire 2) Jail PREA Policy 3) Intake PREA form & Inmate signature sheet 4) Facility Orientation and PREA Video 5) PREA Intake Pamphlet Discussion with the PREA Coordinator, PREA Compliance Manager, Caseworker, and Officers who work the intake area 7) Interviews with inmates 8) Inmate handbook 9) Posted information (PREA hotline, Zero-tolerance, agencies, etc.) 10) Inmate housing unit electronic tablets a.

The Auditor reviewed the jail PREA Policy that indicated that all inmates will receive an initial orientation video with PREA-related training during their initial intake process (PREA handout pamphlet), resident files/intake screen documents, PREA video, and discussed the standard with staff and residents.

During inmate interviews, they indicated that during their intake process they were asked questions related to PREA by officers and again by the medical staff. They all stated that within a few days they were seen by a caseworker and reviewed the PREA. They could all explain the zero-tolerance policy and stated they received the documentation (pamphlets) on that and how to report any activity related to sexual abuse or harassment. During some of the interviews inmates referred to the pamphlet, they were given and that it is also available in the housing units. they explained that it covered the zero-tolerance policy and also included phone numbers for the PREA hotline and also to Women in Need for counseling.

b.

In discussions with the PREA Compliance Manager/Deputy Warden, she indicated that each inmate is given the PREA Assessment Tool. A screening sheet that each inmate completes with or without assistance and is used as a tool to determine how they identify, assess their vulnerability, and assist with housing and overall wellbeing concerns. She provided information on the 30 - day PREA requirement where a caseworker will meet with each inmate within that period, go through the screening again, have them watch the PREA video, and

have them sign off on receiving the training. This was also verified during my interview with the caseworker that handles a majority of the screenings. She indicated that she used the information for counseling and group work with former victims and also sex offenders.

Inmates relayed that they had the right to be free from sexual abuse/harassment, and any retaliation for reporting such incidents. They were could also tell me multiple ways that they could report any allegation. Several did refer to their inmate handbook that provided the information as did the housing unit documentation. It is noteworthy that the vast majority of the inmates spoke of the new housing unit tablets (electronic computer tablets) that they could refer to all the PREA information on. They stated they could rewatch the video, find counseling information as well as contact numbers for assistance should they need it.

C.

According to document review, inmate interviews, and discussion with the PREA Compliance Manager and Caseworker and as indicated all inmates receive their orientation within the 30-day period. The documentation provided for all inmates at the facility indicated their initial commitment date and their PREA orientation date. In a review of the information and discussions with inmates, they all referred to the pamphlet they received on the day they can in as well as the documents they filled out that day. They could as well explain to me that usually within 2 weeks they watched the PREA video and met with the Caseworker.

The Franklin County jail is a one-building operation and managed the same across the board. All inmates receive the same education no matter their location in the jail, their housing assignment, or charges.

d.

The facility video is provided in both English and Spanish with subtitling for those who are hearing impaired, and audio for those who may be deaf. The caseworkers and medical depart work closely with anyone with reading and cognitive disabilities to assure the understand and are classified accordingly to assure their safety. In dealing with specific disabilities where translators are needed, the agency has a contract with Language Services, Inc. to use the phone to translate.

e.

The jail maintains both inmate records on the OMS system and also a hard copy file of all PREA related education, classification, and reviews done on all inmates and maintained through the PREA Compliance Manager/Deputy Warden of Inmate Services/Programs.

According to the Officer in intake a mandatory part of the intake process it to issue the PREA Pamphlet and have them complete the screening form that is forwarded on to management for housing.

f.

During my walkthrough of the jail, it was noted at all inmate phones in the housing units were PREA documentation on the use of the hotline. Each housing unit also had noticeable posting throughout for all inmates to use including their zero-tolerance policy, the inmate's rights to be free from abuse/harassment, and retaliation as well as all ways to report. The documentation was in both English and Spanish and offered information for outside contacts such as the

Women in Need Program. These items were also noted in every inmate handbook that is issued during intake.

Summation

The Auditor was able to take the documentation along with staff and resident interviews and align them to meet the standard. The facility has a well-written policy and documentation was noted throughout and each inmate could report back to me the information they received and where, if needed more could be found. The facility has up to date records on all inmates receiving their PREA education, and all inmates reported that the had.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.33 and all aspects therein. There is no corrective action required.

115.34 | Specialized training: Investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

- 1) Pre-Audit Questionnaire
- 2) Facility PREA Policy; Investigations
- 3) Discussions with PREA Coordinator, PREA Compliance Manager, and Major
- 4) Training Files

a.

The Auditor reviewed pre-audit information, the PREA policy specifically indicates "Specialized Training" that requires the Facility to maintain specialized training for investigations in confinement settings.

During my interviews with the Warden, PREA Coordinator, PREA Compliance Manager, and Major they all indicated that they have completed PREA Investigators training in the past and are all involved in the investigation process at the facility specifically related to Administrative investigations.

b.

Accordingly, the staff interviewed could relay that they received training in the interviewing of sexual abuse victims, how to use Maranda and Garrity warnings, and evidence collection with preservation of that evidence.

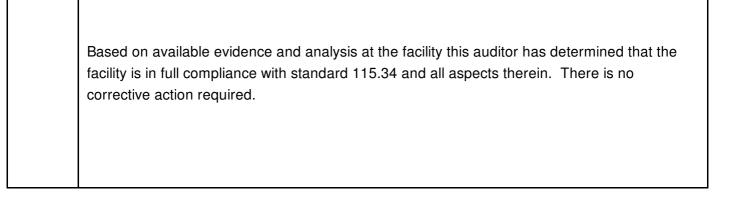
The PREA policy under specialized training does indicate the standards of evidence and use of warnings therein. When discussing the issue with these managers it was noted that all cases are investigated initially by the on-shift Lieutenant and referrals are made to the PA state police for criminal investigation as well as Women in Need for victims services. These managers are also immediately notified.

c.

I was provided with copies of all three (3) certificates of completion that each received the PREA Resource Center Special Investigators training.

Summation

The Auditors review the PREA policy specialized training and certificates for all staff involved along with interviews of the Warden, Deputy Wardens(PREAC & PREACM), and Major gave a clear picture of the agency's standard for investigative training. Through their own certified investigators, the Pennsylvania State Police, and the documented policies, the facility is in compliance with this standard.



115.35 | Specialized training: Medical and mental health care

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

- 1) Faculty Pre-Audit Questionnaire
- 2) Facility PREA Policy
- 3) Agency training documentation
- 4) Certificates of completion National Institute of Corrections: PREA Medical care for sexual assault victims in a confinement setting
- 5) Interview with Prime Care Medical Health Services Administrator (HSA)
- 6) Discussion with the PREA Coordinator and Warden
- 7) Prime Care Medical PREA Policy

а

The Auditor reviewed the agency-wide PREA policy related to specialized training – Medical and Mental Health Care, as well as Prime Care Medicals policy on staff PREA training and requirements.

According to the PREA coordinator, the facility makes all new contractors all go through their contractor training and annual employee training. This included all full and part-time Prime Care employees.

Jail policy indicates that all contractors must be trained in the detection and assessment of signs of sexual abuse/harassment, how to preserve evidence, and how to respond and communicate effectively and professionally with victims of sexual abuse and harassment. This was also relayed to me during my interview with the Health Services Administrator (HSA). He discussed Prime Cares' stance with employees and their mandate for this in all their institutions.

b.

According to the HSA and the PREA coordinator, all forensic examinations are handled by the Chambersburg Hospital through their SAFE/SANE Program, and Prime Care doctors and nursed do not handle this, only working with the hospital on getting them any necessary documentation.

C.

During my review of documents, I was able to review all the contractor's PREA training documentation and sign-in sheets. The facility has all volunteers/contractors sign as they do with employees.

The HSA indicated that they do the same with all their employees under the Prime Care policy. They are presently using Relias on-line training programming for all their employees. The

system allows them to track the program and also notifies when an employee is due for an update. I was provided a copy showing that all present medial employees have completed the Relias training for Prime Care.

d.

At present, Jail does not have any medical or mental health employees that are employees. All are contracted to be at the facility either through Prime Care Medical (who also provided mental health services). The HSA himself has specialized training in Mental health and he related that all of his mental health employees are handled the same way, considering them medical staff and mandating that they complete both PREA training programs.

They all have completed the programs as described in the policy and their information is documented on the proper forms that I had the opportunity to review during the pre-audit and while on-site. All documents are maintained by the PREA Compliance Manager and the HSA for the mandated training that Prime Care requires its employees to complete.

Summation

The auditor review of the documentation on medical staff training and the interviews with key staff linked the components of this standard together to meet this standard. During my interviews with the HSA and medical staff, the could explain back to me the training they received related to zero-tolerance, their duties to report and to whom, preserving evidence, signs to look for in the detection of abuse/harassment. The extra training that medical staff received from Prime Care is a real plus to the institution giving them an extra layer of knowledge, and background. Based on available evidence and analysis at the facility this auditor has determined that the facility exceeds compliance with standard 115.35 and all aspects therein. There is no corrective action required.

115.41 | Screening for risk of victimization and abusiveness

Auditor Overall Determination: Meets Standard

Auditor Discussion

- 1) Facility Pre-Audit Questionnaire
- 2) Facility PREA Policy
- 3) Risk Assessment Tool; 30-Day Assessment Tool
- 4) Discussion with the PREA Coordinator, PREA Compliance Manager, Health Services Administrator (HSA), Caseworker, Officers working the intake area
- 5) Interviews with Inmates

a.

The Auditor reviewed the PREA policy, Risk Assessment, 30-day Assessment, and conducted interviews with the PREA Coordinator, PREA Compliance Manager, Caseworker, HSA, Officers that work intake/booking, and inmates at the facility.

Through my discussions with staff and observing intake, I could see the screening that is performed on all inmates entering the facility for sexual abuse/harassment. The jail only has one facility, thus there is no transfer requiring screening. It should be noted that if someone is transferred to the Franklin County Jail from another facility, they are according to the PREA Coordinator considered a new commitment and screened the same.

b, c.

The PREA policy indicates that the screening must occur in the first 72 hours. During my discussion with the PREA Compliance Manager and Caseworker, they indicated that this occurs immediately at intake and is part of the booking process upon being committed to the facility. I was provided with several documents to review.

The Officers working the Intake area referred to the Risk Assessment Tool, a form that is by policy mandated for all new commitments entering the facility. The forms are to use my staff and forwarded to management to assure proper housing, and assure the safety of the inmate and also others if necessary. Prime Care medical HSA stated their assessment is done within 24 hours as they provide 24-hour nursing coverage at the facility. Their form is digitally captured through their CorEMR jail medical software system. I was able to review this objective system and also provided copies of previously completed reports.

Both the medical and correctional screenings follow the PREA policy and meet the standards through their questions.

d, e.

The inmate screening portion of the PREA policy indicated that the screening will include:

- Does the inmate have any mental, physical, or developmental disabilities
- What is the age of the inmate
- What is the physical description of the inmate
- Does the inmate have a previous incarceration record
- Complete a criminal history check for violent/non-violent crimes
- Any prior convictions for sexual offenses against an adult or child
- Does the inmate identify as LGBTI
- Previous institutional violence, abuse, and/or victimization

Upon review of screening tools, there is a series of questions with choices for the inmate to select throughout the screening. the document is simple and easy to review but is information with the information provided. Inmates are offered assistance with the form should it be needed and it is also available in Spanish.

When discussing the intake/booking process with inmates I interviewed, they could remember these questions being asked when they came in and during their medical screening. They explained that is was a form and some indicated that staff assisted them in completing it. They also pointed out that the completed a similar one when they met with the Caseworker and reviewed the PREA orientation video.

The PREA Compliance Manager discussed the logistics of the forms and how they are forwarded to management. she also discussed how that information is used to assign housing and classification to assure the safety of all.

f.

The facility PREA policy inmate screening section states that all inmates must be screened within 30 days. This issue was discussed with both staff and inmates. When meeting with the Caseworker she indicated that they see everyone within that 30-day period and many done within the first 2 weeks at the facility. PREA policy indicates that rescreening can be done at the inmates' request, that of management, or as requested to assure safety.

Inmates during my interviews were able to articulate that their screening occurred and documentation showed it was done in less than 72 hours, less than 30-day, and the policy allowed for re-screening as needed.

g.

The PREA Policy indicated reassessment will occur as warranted for several reasons including a request, an incident of sexual abuse, a referral by a 3rd party, etc. When speaking with the Caseworker, she indicated that reassessments could occur for a change in housing, programming, and work programs for example.

h.

PREA policy does provide that inmates cannot be disciplined for any refusal to answer the

questions. According to the PREA Compliance Manager and Caseworker, they will attempt to work with the inmate on and off to complete the information. There were no inmates indicated that had not complied with completing this process.

i.

PREA policy specifies that all information collected is considered confidential. The policy states that the information is considered sensitive and only those who are under a "need to know" will be privy to the information. The PREA Compliance Manager/Deputy Warden of Inmate Services is responsible for the management and dissemination of this information.

Summation

The PREA Policy and screening forms establish the criteria for the components of this standard. Through my interviews with staff and inmates, they could articulate how the information was obtained and mirrored the standards in the policy. The documentation provided to the auditor to review was well organized and showed that the facility is working to assure proper data is collected and maintained.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.41 and all aspects therein. There is no corrective action required.

115.42 Use of screening information **Auditor Overall Determination:** Meets Standard **Auditor Discussion** 1) Facility Pre-Audit Questionnaire 2) Provide documentation including those specific to some inmates 3) Facility PREA Policy Inmate Screening 4) Screening Assessments 5) Discussion with the Caseworker and PREA Compliance Manager 6) Discussion with the PREA Coordinator and Shift Lieutenants Inmate handbook 7) 8) Interviews with inmates a. The Auditor reviewed the PREA policy, Assessment tool, and spoke with the PREA Compliance Manager on the use of the data. The policy states that the data collected will be used for housing, work, education, and program assignments. The PREA Coordinator relayed that the assessment completed by the at intake and the follow up done by the Caseworkers provide an objective view that allows for the placement of the

inmate in the best scenario to keep the inmate safe from harm, sexual abuse/harassment, and allow for safe operations of the facility.

b.

When probing on housing decisions the Caseworker indicated that each is made on an individual basis. The documentation provided shows the initial assessment at intake to the follow-up assessment with the Caseworker and the review to assure proper and safe placement of the inmate. there is an email chain when a question on housing for the safety of the inmate is in question to the PREA Compliance Manager/Deputy Warden of Inmate Services to develop a housing plan for the inmate. If necessary specialized housing is offered to the inmate outside of the general population if they would want.

C.

The facility policy states that the Franklin County Jail will not place an inmate in a specific unit, cell, or bed solely based on gender. The Caseworker and PREA Compliance Manager were able to provide information that the individual would be classified on the need's basis including if they were LGBTI, and no one would be housed directly on gender. During the audit and

over the previous year, they have not had an issue with housing and a gender issue.

d, e, f.

In reviewing the policy, the facility addresses each component under Section 10 of the PREA policy. They indicate that the views of each individual are taking into serious consideration for housing, program placement, and work detail. This was discussed with the PREA Compliance Manager, mid-level supervisors, and identified inmates. All were able to explain the policy, and inmates stated that they felt they were treated fairly and were also involved in these decisions.

The policy also indicates that Transgender and Intersex inmate will be given the opportunity to shower separately from other inmates no matter their placement in the facility. This was noted while touring the facility and also speaking with staff and inmates.

g.

The PREA Policy indicates that the facility will not place anyone identified as LGBTI in a housing unit solely based on their specific identification, unless it is in connection with a consent decree, legal settlement, or legal judgment to protect the inmates. Presently the facility is not under any type of legal decree. This was discussed with the PREA coordinator and Warden who indicated they will be assessed on a case by case basis.

Summation

The PREA policy indicates that the facility has addressed the standards and the components of it. I was able to review the necessary documentation that coincided with the PREA Policy, as to understand staff and inmate knowledge through our discussions. The necessary steps are in place to adequately meet this standard.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.42 and all aspects therein. There is no corrective action required.

115.43 Protective Custody Auditor Overall Determination: Meets Standard Auditor Discussion

- 1) Pre-Audit Questionnaire
- 2) Facility PREA Policy Protective Custody
- 3) Interviews with Residents
- 4) Interviews PREA Coordinator and PREA Compliance Manager
- 5) Inmate Handbook
- 6) Document review

a, b.

The Auditor reviewed the PREA Policy section on "Protective Custody" that indicates inmates that are at high risk for sexual victimization shall not be segregated involuntarily unless there no available housing areas to separate them from a potential abuser.

The policy states that within 24 hours Medical/mental health and security staff will complete an assessment that will note other housing alternatives and the reason why they are not an option. The policy goes on to state that if they have to segregate for this reason the inmate will be entitled to have access to programs, privileges, and work opportunities. If someone was placed in protective custody, the Involuntary Administrative Segregation Form would be completed as soon as possible and within 24 hours.

The PREA Coordinator indicated that through the use of and area of M Block that allowed for a separated area, a smaller general population unit that offered full services in a more secure environment.

The PREA coordinator stressed that privileges are still provided should an inmate be placed into segregation. Through our discussions and dour of the facility it was noted that management worked to assure everyone had equal opportunities no matter their housing.

c, d, e.

The facility policy as indicated above will place an inmate into involuntary protective custody will only remain there until an alternative for a potential abuser can be made and is not to exceed 30 days. If the inmate is returned to protective custody, they will be evaluated within 30 days. The Involuntary Administrative Custody Form will be completed to clearly state regarding concerns for the inmate's safety and the reasons why alternative separation was not feasible. According to the PREA coordinator and as noted on the pre-audit questionnaire, this has not occurred over the past year.

Summation

Upon this auditor reviewing the pre-audit questionnaire and the policy, the facility has outlined how they will handle the involuntary use of protective custody. The information provided by the PREA Coordinator outlined the jails' willingness to avoid using involuntary protective custody by establishing M Block to allow for placement of an inmate to avoid segregation. In discussions with management, no one has been involuntarily placed over the past year.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.42 and all aspects therein. There is no corrective action required.

115.51 Inmate reporting **Auditor Overall Determination:** Meets Standard **Auditor Discussion** 1) Pre-Audit Questionnaire 2) Facility PREA Policy - Reporting of sexual assault/rape or sexual harassment 3) Inmate Handbook Interviews with Inmates 4) 5) Inmate PREA pamphlet issued at booking 6) Posting throughout the facility 7) Website postings 8) PREA Information in housing units and on inmate electronic tablets 9) Staff Interviews and staff training 10) MOU for the Department of Corrections PREA hotline 11) Discussion with the PREA Coordinator and Compliance Manager a. The auditor reviewed the agencies' PREA policy: Report of sexual assault/rape or sexual harassment and spoke with multiple inmates, staff, and management. The agency makes available a variety of ways for inmates to privately report sexual abuse/harassment, retaliation, and staff abuse/neglect. It includes the request system, grievance system, reporting to a staff member, or through a 3rd party. b. The easiest way for an inmate to report to another agency is through the inmate phone system to the 24/7 hotline operated by the Department of Corrections, Bureau of community corrections. I was provided a copy of their memorandum of understanding with both agencies. Also listed in their PREA Pamphlet on all units and provided to each inmate are hotline numbers to the PA Coalition on Rape and Women In Need (WIN), their local rape crisis center, and victims advocate. Each of these allows the inmate to remain anonymous when reporting. The agency does not address issues related to those detained solely on civil immigration purposes. They do not hold ICE detainees and it is noted that other local counties nearby have large ICE facilities and anyon detained by authorities would be transferred to those

c, d.

facilities.

The facility policy allows inmates to make verbal, written, and from 3rd parties. They make the hotline number public and also provide the phone number to the jail's supervisor, so someone could directly call in and report immediately to a supervisor at the facility.

The policy allows staff to report privately any allegation of sexual abuse/harassment that they would encounter. They can report on behalf of an inmate who provided information as a 3rd party. Staff also have the ability to call the DOC hotline via their 800 number. It is provided to staff in the PREA Policy and also through their annual PREA training. Management went a step further and placed a locking mailbox in the employee roll call room for private complaints to be lodged with the facility.

During interviews with staff, they were able to articulate their training and understanding of both their reporting responsibilities and ways to report if they witness an incident or are provide information from a victim or 3rd party. They all were aware of their mandatory reporting duties and could provide me with the chain of command for reporting. They could explain what they would do should an inmate verbally report to them, they all replied that they would notify their supervisor (Lieutenant) or go directly to a Deputy Warden or Warden. Staff when questioned how quickly this would occur and how quickly a report would be generated they all stated, "immediately".

Summation

The PREA policy provides detailed ways for inmates to report including in writing, verbally, confidentially, and through 3rd parties. The facility provides means for this including addressed, 24/7 hotline, etc. The inmates I interviewed were aware of ways to report including directly to a staff member, a supervisor, or using the inmate phone hotline. They were able to explain that they could report on behalf of someone or have someone like a family member report for them. While most told me they would use the inmate phone system and use the speed dial "PREA button", they could also explain other ways to report and also were aware that someone could report on their behalf.

Staff members alike could tell me how they could report and what chains of command they would follow to do so. They indicated that reporting was covered annually during their training. They were aware of the lockbox in their roll call room and their ability to call the DOC hotline if needed as well.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.51 and all aspects therein. There is no corrective action required.

115.52 Exhaustion of administrative remedies **Auditor Overall Determination:** Meets Standard **Auditor Discussion** 1) Pre-Audit Questionnaire 2) Facility PREA Policy 3) Facility Inmate Grievance Policy 4) The grievance filed in the previous year 5) Inmate Handbook 6) Interviews with inmates

- 7) Staff Interviews
- 8) Discussion with PREA Coordinator and Compliance Manager

b.

The PREA policy allows the inmates to use the facility grievance system to file an allegation of sexual abuse/harassment. No time limit will be placed on the inmate's filing of the grievance for abuse/harassment and the inmate does not have to use the official grievance paperwork. This was also noted in the inmate handbook and inmates that I interviewed indicated they could file using the jails grievance system.

According to the Pre-audit questionnaire the facility had 1 grievance filed for sexual abuse/harassment over the past year and the PREA coordinator stated that both were filed using the official grievance form. As noted, the grievance did not reach step 3 because the inmate filed his complaint using 3 different methods. the first to staff, then calling the hotline, and finally filing a grievance. The investigation began immediately on the verbal complaint and was carried through the entire investigation on that method. The grievance was complete on stage 2 and the inmate in the review if the investigation was satisfied with the response and investigation.

C.

Grievances are submitted via the grievance box on the housing unit or according to the policy can be submitted to an administrator at the facility.

The agency policy also allows for a grievance to be submitted to another staff member that the grievance is not with. The grievance filed by an inmate for sexual abuse/harassment will not be referred to the staff member for a response if it is filled against that staff member.

d.

The facility outlines in its PREA policy that the grievance will be answered to the inmate within 90 days of filing. According to policy and discussion with management the stand by the 90-day rule, and do not use the 70-day extension. The Jail administration must, according to policy notify the inmate in writing. If the facility fails to respond within the original time the inmate can consider that a denial of the grievance.

I discussed the use of this system with the inmates who as indicated were aware of the grievance system but were not able to explain the timeframe to me. Some know it existed, were unsure of the full policy. I was able to see review the procedure and was aware the inmates had the same documentation. Several inmates said there were easier ways to file a PREA complaint, like using the phone instead of relying on the grievance system. This may be true, but the policy existed none the less.

e.

According to the PREA Policy, a 3rd party may submit a grievance on the behalf of an inmate concerning an allegation of sexual abuse/harassment seeking administrative remedies. This includes but is not limited to family members, other inmates, attorneys, staff members, etc. If the inmate declines to have the grievance filed by that 3rd party the jail policy indicates it will be noted in the report and documents the inmate's decision in writing.

it should be noted that the facility has not received any 3rd party grievances in the previous year.

f.

The Franklin County Jail has established in its PREA policy steps for an emergency grievance to be filed for an inmate believed to be at substantial risk of sexual assault. Upon receipt of an emergency grievance, staff and supervisors will immediately forward the grievance/complaint to administrative staff where action may be taken within 48 hours. A final decision will be made on the emergency grievance within 5 consecutive days.

The PREA coordinator indicated during the discussion that they treat every alleged sexual assault/harassment as a priority assuring that it is addressed as quickly as possible to assure the inmate's safety. He also indicated that any and all allegations filed for sexual assault/harassment no matter how they are filed are followed up and investigated immediately.

g.

The facility's PREA policy does allow for disciplinary sanctions in relation to the filing of sexual assault/harassment only if they are filed without merit or in bad faith. When discussed with management and inmates the both indicated that is the claim is false, then disciplinary sanctions would be considered.

Summation

The Auditor was able to evaluate the written procedure and compare it to interview information from the PREA Coordinator and inmates. They cover the components of the standard in the policy and it is linked to both their grievance and disciplinary (if needed) policies. As indicated there was 1 grievance filed over the last year for sexual assault and because the issue was

filed before that through the hotline and verbally it was tied to the initial investigation and completed that way. There were no 3rd party requests filed in the last year, however, the components were defined in the policy, the inmate handbook, and on the units available to all inmates.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.52 and all aspects therein. There is no corrective action required.

115.53 Inmate access to outside confidential support services

Auditor Overall Determination: Meets Standard

Auditor Discussion

- 1) Pre-Audit Questionnaire
- 2) Facility PREA Policy
- 3) MOU with Franklin & Fulton Women In Need, Inc.
- 4) Interviews with inmates
- 5) PREA Pamphlet and postings
- 6) Inmate handbook
- 7) Discussions with PREA Coordinator and Compliance Manager

a.

The auditor reviewed the PREA policy, "access to outside support services and legal representation", the MOU with Franklin & Folton Women In Need, Inc.(WIN), PREA Pamphlet, and the inmate handbook. These documents indicate that the facility offers various support services for inmates to speak with about sexual abuse/harassment and counseling services. The documents contain addresses and phone numbers for WIN and the PA Rape Coalition on Rape. This information was also listed in the housing units and could be found on the new inmate electronic tablets.

The facility does not house not detain ICE detainees and this section was not available.

In discussion with it was noted that the inmates could contact any of these agencies if and whenever they would need to and the information would be as confidential as the inmate wanted it to be.

b.

According to the PREA policy, the facility will ensure that all inmates have reasonable communications with each agency and that a level of confidentiality is maintained for the inmate. The handbook does indicate that calls on the inmate phone system to these agencies will not be monitored by Franklin County Jail Personnel. The policy states that if contact with the agency is needed, the jail will inform the inmate prior to the extent of communications monitoring and inform the inmate of what will be given because of mandatory reporting laws.

C.

In accordance with the standard, the agency has a Memorandum of understanding (MOU) with a local non-profit victim advocate agency, Franklin & Fulton Women In Need, Inc. They are providing victims advocate services and emotional support to the inmates at the facility as needed. I had the opportunity to review their information, website, and speak with a staff

member there.

Summation

The auditor was able to view the policy, inmate handbooks, PREA pamphlets, and see postings in the housing units concerning available support services. Interviews with inmate reviled their knowledge of the available services and where to find contact information.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.53 and all aspects therein. There is no corrective action required.

115.54 Third-party reporting **Auditor Overall Determination:** Meets Standard **Auditor Discussion** 1) Pre-Audit Questionnaire 2) PREA Policy – 3rd Party Reporting 3) Interviews with PREA Coordinator 4) Facility postings, PREA Pamphlet, and unit postings 5) Franklin County website a. The PREA policy addresses for 3rd party reporting on behalf of an inmate who is the victim of sexual abuse/harassment from a family member, friend, attorney, another inmate, etc. The facility has established through its policy to allow these 3rd parties to file a request for administrative remedies on behalf of an inmate. They have made public the DOC hotline number to the general public on their website and also posted in the lobby for anyone to file a complaint. This is noted in the policy, in the PREA Pamphlet that is also provided to the public as well as inmates and is printed in both English and Spanish. Summation The facility provides sufficient information to meet this standard through information in policy, on their website, and in various documents in the facility. During interviews, inmates were aware of the postings, handbook, and unit binder and their right to report on behalf of another and also that someone including family could report on their behalf. The posting was seen in the lobby for visitors and was noted on their website.

Based on available evidence and analysis at the facility this auditor has determined that the

facility is in full compliance with standard 115.54 and all aspects therein. There is no

corrective action required.

115.61 Staff and agency reporting duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

- 1) Pre-Audit Questionnaire
- 2) Facility PREA Policy, "report of sexual assault/rape or sexual harassment"
- 3) Facility Training PowerPoint
- 4) Discussion with the county Human Resources Director
- 5) Interviews with PREA Coordinator, Compliance Manager, and Warden
- 6) Interviews with staff and mid-level supervisors
- 7) PREA Investigations
- 8) Prime Care PREA Policy and interview with Health Service Administrator regarding reporting requirements

a.

In a review of the PREA policy, the facility outlines therein that staff, volunteers, and contractors upon receipt of an allegation, learning of an incident that may have occurred elsewhere, their witness to an incident, or their suspicion they must immediately report to a supervisor. The policy also included the immediate reporting of any issue of retaliation past or present in relation to a report of abuse or harassment.

During my interviews with staff, the could site the section of the policy and list their reporting duties as they relate to any abuse. They also could explain the jail's policy on neglect and also that they were responsible for assuring an inmate who reported were free of retaliation from staff and inmates. Some were very detailed indicated their mandated duties under Pennsylvania law and that they could be criminally charged for not providing proper care in their roles at the jail. Management reported the process as outlined in the policy related to staff reporting.

b.

Under the "Staff Reporting Procedure" of the PREA Policy, staff are mandated to report, no matter the source, and are to report immediately. The policy states this must be done verbally and via an incident report to their immediate supervisor. The PREA policy does also spells out the use of private reporting by using the lockbox in their roll call room. The policy also stresses that the information is confidential in nature.

Staff including contractors that were interviewed were aware of the confidential nature of their reports. The PowerPoint annual training also stressed that all information was to be kept confidential.

C.

As stated earlier, contractors, including medical staff must report immediately any allegation, previous allegation, retaliation incident, etc. to a supervisor at the facility. Under Pennsylvania licensing standards for medically licensed personnel, they are mandated reporters and are subject to loss of license and prosecution for not rendering assistance. They also must notify the inmate that they have mandated reporters and the level of confidentiality they are required to maintain. According to the HSA, Prime Care policy also spells this out as does the Relias online training program.

d.

According to the PREA Coordinator, Compliance Manager, and Caseworker as well listed in the policy, the facility will if a youthful offender is a victim or deemed vulnerable to sexual abuse, the would contact Childline, the Pennsylvania Department of Human Services hotline for the care and custody of youthful offenders. This information is provided in the PREA Policy and inmate handbook. It should be noted that the facility does not have any youthful offenders at this time. The PREA policy provides the hotline number to childline as well as their website address for an online version of the hotline.

e.

In discussions with the Warden and PREA coordinator, all allegations of sexual abuse and assault are reported under the policy to be an investigation. The Major and Deputy Wardens all are certified investigators and the state police would be brought in immediately for incidents of abuse.

When speaking with staff, the could explain that the immediately notify their shift Lieutenant of the allegation and it would be forwarded to management for immediate investigation.

Summation

The Auditor triangulated the information of the standard with the written PREA policy and Prime Cares PREA policy and the information gathered from interviews with staff to confirm the facility is in compliance with this standard. There are steps built in that both management and line staff could discuss and give feedback on.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.61 and all aspects therein. There is no corrective action required.

115.62 Agency protection duties Auditor Overall Determination: Meets Standard Auditor Discussion

- 1) Pre-Audit questionnaire
- 2) PREA Policy Response and first responder duties
- 3) Discussion with the PREA Coordinator, Lieutenants, and Major
- 4) Interviews with staff

a.

PREA Policy dictated that the Franklin County Jail will take immediate action to protect an inmate who is in danger of imminent sexual abuse. Upon an issue occurring related to a threat or occurrence, the staff is to notify their shift Lieutenant immediately to respond to address the potential concern. The officer is to assure the inmate's safety until a supervisor arrives. The Lieutenant will immediately secure the individual and offer protections to the individual.

According to staff, they would secure the unit and assure the inmate is separate from the potential abuser(s). Immediately notify their supervisor to report to the unit and advise them of the concern for the inmate's safety. The Lieutenant and Major stated they would immediately arrive, speak to the officer and the inmate, and begin the process to address the situation.

Summary

This Auditor was able to review the data in the PREA policy and compare it with the interviews of staff and management to see and understand the steps the Jail would take to secure the safety of the inmate while working within the parameters of the policy. According to the PREA Coordinator they have not had any such incidents over the previous 12 months.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.62 and all aspects therein. There is no corrective action required.

115.63 Reporting to other confinement facilities Auditor Overall Determination: Meets Standard Auditor Discussion

- 1) Pre-Audit Questionnaire
- 2) Facility PREA Policy Reports to and from other confinement facilities
- 3) Interviews with Warden and PREA Coordinator
- 4) Document Review

A, b, c, d.

The auditor reviewed the PREA policy section regarding reporting to other confinement facilities. The policy states that upon an allegation being reported occurring to an inmate in the custody of the Franklin County Jail the Warden or designee will call the facility in question where the allegation occurred and al notify that facilities investigative authority (PA PSP, District Attorney, local police, etc.) via phone. This notification will occur in less than 72 hours after the inmate came into the jail's custody. The allegation will be documented at the facility and forwarded per policy to the other confinement facility and other necessary agencies.

In discussions with the Warden and PREA coordinator, they have not made any notifications over the past 12 months. They did indicate and also document that they were notified by the State Correctional Institution at Fayette of an allegation made there. According to the information, the PA state police were already aware of and investigating the incident. This is also listed in the PREA policy and states that any report provided to the Franklin County Jail from another facility reporting an allegation of abuse.

When discussing how they handle notifying or receiving notifications, the facility management was able to explain the process as indicated in the policy and how they have addressed these issues in the past as examples.

Summation

The Auditor's evaluation of the overall policy and information provided from the Warden and PREA Coordinator shows a protocol and follow through on the part of the facility. Evidence was provided showing 1 report filed to other correctional facilities.

Based on available evidence and analysis at the facility including discussion with Warden and PREA Coordinator this auditor has determined that the facility is in full compliance with standard 115.63 and all aspects therein. There is no corrective action required.

115.64 Staff first responder duties **Auditor Overall Determination:** Meets Standard **Auditor Discussion** 1) Pre-Audit Questionnaire Facility PREA Policy - First responders 2) 3) Interviews with Warden and PREA Coordinator Interviews with Staff and Night Lieutenant 4) 5) Employee Training Documents - First responder duties 6) Powerpoint – annual PREA update training 7) Interviews with Health Services Administrator (HSA) a. The auditor reviewed the PREA Policy related to First Responder duties, conducted interviews with staff, the Warden and PREA Coordinator, and reviewed the annual training related to first responders. The policy states that the first responder will immediately secure the individual, call the appropriate response for the Shift Lieutenant/medical/additional staff to respond.

They are to be aware of all involved in the incident, secure the crime scene for further processing. The policy indicates that the scene must be secured and the victim(s)/abuser(s) are to be separated and kept from destroying any physical evidence that could be collected.

b.

According to the PREA Coordinator, Warden, and staff/contractors interviewed all personnel receives first responder training to have the ability to initially handle the situation and assure crime scene evidence preservation.

During my interviews with staff and medical contractors, they all could explain to me the role of a first responder, and how they would assure the safety of the victim(s) and also securing the crime scene and physical evidence. They all spoke of not washing or changing clothes, not cleaning the area, brushing teeth, etc.

The policy discussed proper techniques of dealing with a victim to not "re-victimize" them. The staff could explain how they should speak to victims, not assign blame, etc. When speaking with the HSA from Prime Care HSA indicated their training through Relias provides for techniques to comfort victims of sexual abuse when addressing an incident.

Summation

The Auditor feels the policy criteria and the information feedback from all staff interviews knowing their roles as the first responder was clearly understood by all and they could when ask to give specific detail to responding to a sexual assault in the facility, this meeting this standard. The policy and training information was viewed and was in line with staff responses.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.64 and all aspects therein. There is no corrective action required.

115.65 Coordinated response **Auditor Overall Determination:** Meets Standard **Auditor Discussion** 1) Pre-Audit Questionnaire Facility PREA Policy - First responders 2) 3) Interviews with Warden, PREA Coordinator Interviews with Major and Lieutenants 4) 5) Interview with Health Services Administrator (HSA) 7) Employee Training Documents – First responder duties a. The Facility has coordinated responses for a multitude of incidents that could arise at the facility. The PREA policy addresses the standard for a coordinated response among security, medical, management, and outside agencies. The Lieutenant would assume command of the incident upon arrival and coordinate services and have staff secure the scene. Medical would be immediately notified as well as Management personnel. The HSA indicated that staff from Prime Care medical will respond immediately to an incident of this nature with a portable medical bag and provide medical assistance as needed to inmates and security staff while managing the incident. When speaking to line staff, they not only could explain their responsibilities but that of the supervisor and medical personnel. They were presented with a scenario and could explain to me that they would secure the scene, contact the Lieutenant who would manage the scene, medical would be contacted as well as management and the state police. Summation The Auditor found enough evidence to show staff knowledge of the PREA policy and facility response policy is evident and the necessary tools are in place to meet the standards as outlined in their PREA Policy and were easily articulated among staff interviews.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.65 and all aspects therein. There is no corrective action required.

115.66 Preservation of ability to protect inmates from contact with abusers Auditor Overall Determination: Meets Standard **Auditor Discussion** 1) Pre-audit Questionnaire 2) Facility PREA Policy 3) Interview with the PREA Coordinator, Warden, and Human Resources 4) Collective Bargaining Unit Agreement with AFSCME a. The Franklin County Jail corrections officers are members of AFSCME and have a collective bargaining unit agreements in place. The PREA policy stated that the Franklin County Jail will not enter into any collective bargaining unit agreement the will limit the ability to remove staff who are alleged sexual abusers from contact with inmates pending the outcome of an investigation. The Warden and HR Director indicated that specific clauses related to PREA were placed into the agreements several years ago. As PREA Standards dictate and noted with the collective bargaining agreement...the agreement cannot work outside of the law and employees will be subject up to and including termination and the agreement cannot overrule the county's policies or the PREA standards. Summation Through a review of agreements, discussions with the Warden this auditor was able to show that the facility has met the components of the standard with the information placed into the bargaining agreements.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.66 and all aspects therein. There is no corrective action required.

115.67 Agency protection against retaliation

Auditor Overall Determination: Meets Standard

Auditor Discussion

- 1) Pre-Audit Questionnaire
- 2) Facility PREA Policy Protection from retaliation section
- 3) Interview with the PREA Coordinator
- 4) Interview with the Major
- 5) Inmate handbook and postings

a.

The Jail PREA policy states that the will strictly enforce protection from retaliation for both the inmates and the staff the report sexual abuse/harassment or those that cooperate with such investigations. The PREA Coordinator indicated that retaliation monitoring according to policy is designated to the Captain of Investigations for monitoring. If they suspect any retaliation has occurred, they will immediately notify the administration.

It should be noted that the present Captain was recently promoted from Lieutenant to this position. The Major held the Captain's role until his recent promotion and is training Captain Scott now. For the interviews, I chose to interview the Major as he up until now handled retaliation.

b.

The policy describes multiple measures to assure there is not retaliation that can occur including but not limited to the removal of the alleged staff member or inmate from contact with the victim. Provide emotional support services to the inmates and staff who are concerned over potential retaliation.

The Major stated that they will first look at separation to assure no issues. The Captain will meet with the victim/reporter to discuss their right to be free from retaliation and how to report to them if there are any issues that arise.

c.

Policy dictates that when a sexual abuse report is made the Captain and administration at the jail will monitor the conduct and treatment of inmates or staff who have made the report. They will see if there are any changes that suggest retaliation by an inmate or staff.

If any retaliation is found, the policy states that immediate action will be taken to remedy any such retaliation. Remedies include but are not limited to housing unit changes programming changes, staff reassignment, or discipline up to and including termination.

Under the present policy, the Captain of Investigations will handle the monitoring foe anyone reporting sexual abuse/harassment. When speaking with the Major (former Captain) he indicates they conduct monitoring in a couple of ways. Directly speaking to the inmate/staff

member and sometimes monitoring behavior or from afar to assure there is no retaliation. The facility will if necessary extend the 90-day monitoring to if a need arise.

d.

As indicated the monitoring will include direct and indirect status reviews looking at a multitude of items. The major explained that he will look into issues with the inmate including changes in status, housing, programming, disciplinary status, etc. He explained that they look at several issues to assure they are safe.

e.

According to Policy and discussion with the PREA Coordinator and Major, all individuals involved in an allegation from the victim to any witnesses are put into retaliation protocol to assure they are not retaliated against even if they do not express concern.

Summation

The Auditor found that the Facility policy and discussions with the Major and PREA coordinator conformed the necessary detail for the standard and the were able to express their knowledge on how to properly assure someone is free from retaliation and could give examples on handling this thus meeting the standard.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.67 and all aspects therein. There is no corrective action required.

115.68 Post-allegation protective custody **Auditor Overall Determination:** Meets Standard **Auditor Discussion** 1) PREA-Audit Questionnaire

- 2) Facility PREA Policy
- 3) Interview PREA Coordinator, Compliance Manager, Major
- 4) Interview with identified inmates/random inmates

a.

The auditor reviewed information from the pre-audit questionnaire that outlined Protective Custody and discussed the same with the PREA coordinator and Compliance Manager. As indicated earlier, the agency's use of protective custody is not voluntary is only on an emergency basis and they will afford all available programming, work privileges, etc. of general population to the inmate. The facility has not used emergency/involuntary protective custody over the past year. According to the PREA coordinator, they have addressed all issues through alternative housing options such as M Block for a more secure, monitored general population unit. The facility has not used this status over the previous 12 months. When speaking to inmates that were identified, they provided information that the facility used M Block and they had the same privileges as those in general population. It should be noted that all of these inmates were once in M Block and have since been moved to regular general population for programming or their request.

Summation

It is the auditors' findings that the facility meets the requirements of this standard. They have a Protective Custody policy to address if needed involuntary PC but have not had to use it in the recent year of reporting. The agency can meet the components of this standard by those that they meet in 115.43 Protective Custody.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.68 and all aspects therein. There is no corrective action required

115.71 | Criminal and administrative agency investigations

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

- 1) Pre-Audit Questionnaire
- 2) Facility PREA Policy Investigations
- 3) Interview PREA Coordinator
- 4) Interview with the Major (former Captain recently promoted)
- 5) Interview with the Warden
- 6) The Pennsylvania State Police facility criminal investigations
- 7) Review of investigative documents

a.

The auditor reviewed the PREA Policy, the Pennsylvania State Police responsibilities, and pre-audit material. The policy indicates that the Franklin County Jail Captain of Investigations will conduct their investigations in conjunction with the Pennsylvania State Police into all allegations of sexual abuse and sexual harassment. They will do this in a prompt, thorough manner and will always be objective when investigating allegation including that of 3rd parties and those provided anonymously. The State Police indicated that they will immediately report to the facility upon any request for investigation and provided information on their response.

When speaking with those identified as investigators (Deputy Wardens (PREA Coordinator and Compliance Manager and Major) they were able to articulate the immediate response to any and all allegations no matter how they were received. The Major has been completing all administrative investigations over the past several years but was recently promoted. He is still handling them and training the recently promoted Captain of Investigations and assisting him with his transfer to this role.

b.

The jail has multiple investigators in the facility that have completed a certified PREA Investigators training certification. All three have been certified for several years and they are working on a class to have the new Captain certified soon.

C.

According to the PREA policy on investigations, the Captain of Investigations will gather and preserve direct and circumstantial evidence including any physical evidence and DNA. The policy also covers any recorded and electronic data available like video evidence. During my discussion with the Major, he provided information on how he addresses investigations and the documentation used.

The State Police do not have officers that are PREA investigation certified, however, they utilize the highest standards established for their department's investigative protocol in all

cases they address. they will assign a criminal investigator to the case immediately to complete the investigation.

d.

According to the management that I interviewed all information reviewed on administrative investigations of abuse that are substantiated are immediately referred for criminal investigation and prosecution. Depending on the circumstances, the on-shift Lieutenant will begin notifying management foe the investigation and may also notify PSP if the case appears criminal or they will be advised to do the same by management. PSP indicated that all if their cases are substantiated, will be referred to the county District Attorney for potential prosecution.

e.

As outlined in the PREA policy and explained by the Warden, Coordinator, and Major, creditability will not be measured as to the status of the individual making the allegation (if the are an inmate or staff), but on the will be determined on an individual basis. The Major explained they look at all allegations to examine the fact if it did or didn't occur, not who is making the allegation.

According to the PREA policy and discussion with the Major, the facility will not require an inmate who alleges sexual abuse to submit to a polygraph exam or other truth-telling devices.

f.

According to the policy, investigators shall include efforts to determine if staff actions or failure to act caused or contributed to the abuse. All managers indicated that this information is also used to determine if an operational change or physical plate should occur. They will during their Investigative review and also their weekly briefings discuss the finding, and look at any recommendations for the facility and operational changes as needed.

All investigations are documented including evidence, statements, and reports. They are completed through the Captain of Investigations and the final report forwarded to the PREA Coordinator for filing when complete. They were made available for this auditor to review while on site.

g, h, l, j.

As with administrative investigations, records on criminal investigations are maintained in the same manner. The State Police will provide documentation to the facility to maintain with the administrative file on the case. The Facility has a procedure for issuing a tracking number by the PREA Coordinator to all investigations for follow-up and recording purposes.

The policy indicates that all documentation will be maintained the length the abuse is incarcerated or employed plus 5 years and done so by the Captain of Investigations. The records retention policy is outlined in the standards and was discussed during our interview.

Management personnel explained that their policy dictated that the departure of the accused abuser does not mean that the investigation will be terminated. This includes inmates moved for court-related issues and staff who may resign or be terminated. The PREA Coordinator indicated that the investigation would continue as with all other cases.

As noted earlier and discussed with all managers the facility has an agreement with PA State Police for completing criminal investigations. PREA policy indicates that the facility will grant PSP investigators full unrestricted access to the police for completing their investigations.

According to both management and in discussion with PSP, they have had a very good working relationship for several years and been supportive of each other when working on an investigation.

Summation

The policy and document review along with the information from my interview with the Major (former Captain of Investigations), PREA coordinator, and Warden have led the auditor to see evidence that the agency meets the requirements of this standard regarding criminal and administrative investigations. The written policy and the ability to articulate this were clear. The facility has placed a big priority on the process, developing special tracking forms as well as numbering systems to assure efficiency and follow-through.

Based on available evidence and analysis at the facility this auditor has determined that the facility exceeds standard 115.71 and all aspects therein. There is no corrective action required

115.72 **Evidentiary standard for administrative investigations Auditor Overall Determination:** Meets Standard **Auditor Discussion** 1) Pre-Audit Questionnaire 2) PREA Policy – Investigations 3) Interview with the PREA Coordinator, Warden, and Major a. The Auditor reviewed the PREA Policy – Criminal and Administrative Investigations that stated, "the Franklin County Jail shall impose no standard higher than the preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated". During Interviews both the PREA Coordinator, Major, and Warden they were able to explain the investigative process and this standard. It was clear in the interview with the Major that he has worked in this role and could understand the process of their policy and this standard. Summation The PREA policy and the information provided from interviews shows that the facility follows and understands this section and follow the standard. Based on available evidence and analysis at the facility this auditor has determined that the

facility is in full compliance with standard 115.72 and all aspects therein. There is no

corrective action required.

115.73 | Reporting to inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

- 1) Pre-Audit Questionnaire
- 2) PREA Policy Reporting to Inmates
- 3) Interview with the PREA Coordinator and Compliance Manager
- 4) Interview with targeted resident
- 5) PREA Notification Form

a, c, d.

The auditor reviewed the PREA Policy that indicated, "Upon completion of the investigation the PREA Coordinator/Compliance Manager will notify the inmate if the allegation were substantiated, unsubstantiated or unfounded". It goes on to discuss that if a staff member was involved the inmate will be notified, "when the staff member is no longer posted on the inmates housing unit; if they are no longer employed by the jail; the jail learns the staff member has been arraigned on sexual abuse charges; the staff member has been convicted on charges of sexual abuse".

e.

This auditor was provided with samples of the notification form used when reporting to inmates. the form has boxes to check with appropriate responses and they are to right out information give it to the inmate. The Compliance Manager will keep this document with the inmates' treatment files as well.

A sample I was given shows reporting to an inmate last August on an unfounded case. the information was clear and the form easy to follow. It included an area for additional information for example this form indicated that the inmates were still kept separated after the incident to assure safety and security.

Summation

The Auditor through review of policy and interviews has determined that the facility is complying with notifying the inmates of the findings. There is evidence to show that adequate reporting to the resident occurred.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.73 and all aspects therein. There is no corrective action required.

115.76 Disciplinary sanctions for staff Auditor Overall Determination: Meets Standard Auditor Discussion 1) Pre-Audit Questionnaire

- 2) Facility PREA Policy related to staff discipline
- 3) Interview with the Warden
- 4) Discussion with Human Resources
- 5) Interview with PREA coordinator

a, b.

This Auditor reviewed the PREA Policy related to the staff discipline section that states, all staff will be subject to discipline up to and including termination for violating the PREA policy and standards. Termination will be presumptive action for staff who engage in sexual abuse.

During my discussion with the Warden and coordinator, they explained that they review each issue on a case by case basis but believe that most violations of PREA-related issues and abuse, specifically around a zero-tolerance policy would result in termination.

It is also note worthy that Pennsylvania Law states "any sexual contact". Under Pennsylvania law, an inmate cannot consent with an employee, volunteer, or contractor at a facility, it is a felony and known as "Institutional Sexual Assault".

C.

The PREA policy states that disciplinary sanctions for violations of this policy (other than actually engaging in sexual abuse) shall be corresponding in size and nature to the circumstances of the act committed, the staff members disciplinary history, and those sanctions imposed on other staff for similar incidents.

The Warden explained the process in relation to the policy and the County HR Department. In speaking to HR staff, I was advised that they would take recommendations from the Warden and would levy sanctions based on the criteria as described in this policy. The policy as indicated earlier stated discipline up to and including termination.

d.

Policy dictates that any allegation of sexual abuse is reported to law enforcement for investigation and prosecution regardless of the alleged perpetrator resigned before instead of termination. The same is true for those under licensing. For example, a nurse would be reported due to the licensing body over her work. The Jail/County would take all necessary steps to notify any licensing or mandatory reporting agency.

Summation

Upon review of the policies and discussion with the Warden and Human Resources, I can see the alignment of the elements of the standard. When speaking with the staff they all knew what the policy stated and that they could lose their job or be prosecuted, this was common among all staff when interviewed, knowing both the PREA policy and Pennsylvania law regarding both sexual assault or harassment.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.76 and all aspects therein. There is no corrective action required.

115.77 | Corrective action for contractors and volunteers

Auditor Overall Determination: Meets Standard

Auditor Discussion

- 1) Pre-audit questionnaire
- 2) PREA Policy regarding staff, volunteer, and contractor discipline
- 3) Discussion with the Warden
- 4) Discussion with the PREA Coordinator
- 5) Discussion with the PREA Compliance Manager
- 6) Volunteer/Contractor PREA Training
- 7) Training records

a.

PREA policy states that contract employees and volunteers who engage in sexual abuse/harassment shall be prohibited from contact with inmates and will be reported to the PA State Police unless the activity is clearly not criminal. The Jail will also make contact with any licensing agency or reporting agency related to the contractor's professional credentials or licenses.

b.

Also addressed in policy is if a volunteer/contractor violates PREA policy and/or zero-tolerance policy. The Franklin County Jail will take appropriate measures and will consider prohibiting further contact with inmates and the facility.

In speaking with management at the facility and reviewing the volunteer/contractor training and record it was noted that included in the training is information both on discipline for a volunteer/contractor but the potential outcome as well as Pennsylvania law prohibiting contact. The facility explains that such a violation could not only result in removal and criminal prosecution against the individual but could result in termination of the vendor contract. All three managers of the facility indicated that substantiated allegations would be grounds for them to remove the volunteer/contractor permanently from the facility.

Summation

The Auditor reviewed the Facility's PREA Policy, pre-audit information, and interviewed all management at the facility while reviewing the components of this standard. Through the discussions and review of the policy, training documents, and those interviews it is noted that they have a clear policy and training program for volunteers and contractors when addressing any case of sexual abuse/harassment.

Based on available evidence and analysis at the facility this auditor has determined that the

facility is in full compliance with standard 115.77 and all aspects therein. There is no corrective action required.

115.78 Disciplinary sanctions for inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

- 1) Pre-Audit Questionnaire
- 2) Facility PREA Policy regarding disciplinary sanctions for inmates
- 3) Interview with PREA Coordinator and Major
- 4) Inmate handbook and information provided on electronic tablets
- 5) Jail Disciplinary Policy
- 6) Interview with the Warden PREA Compliance Manager
- 7) Interviews with inmates and targeted inmates

a.

The auditor reviewed the PREA Policy, the section on Disciplinary Sanctions for Inmates that states inmates will be subject to disciplinary sanctions under the Franklin County Jail Disciplinary policy following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or inmate on staff sexual abuse after the investigation is complete.

b.

The policy and handbook indicate that the sanctions will be in line with the nature and circumstances of the abuse committed, including a review of the inmate's disciplinary history and the sanctions imposed for a comparable offense by other inmates.

C.

The facility will take into consideration the inmate's mental disabilities or mental illness if it contributed to his or her behavior when determining what type of sanctions to impose. According to the PREA Coordinator and Compliance Manager, this is taken into consideration in all disciplinary misconduct hearing to assure they are addressing the underlying needs of the inmate and getting to the root of the issue that may be causing the inmate's behavior. If so the inmate would be placed or offered counseling or outside assistance.

d.

According to the Compliance manager, they offer counseling and mental health services through facility Case managers, Prime Care Medical, and outside agencies like the Women In Need program. The county policies indicate that the jail will decide on an individual basis to require the offender to participate in therapy or counseling. According to our discussion, this may be done during the disciplinary hearing or upon program review after and throughout periodic reviews of the inmate's disciplinary status.

e.

The Jail may discipline inmates for sexual contact with staff ONLY upon finding that the staff member did not consent to the contact. The policy also indicates that the State Police will conduct a criminal investigation into the incident. On a side note, Pennsylvania title 18 does not allow a staff member to have consensual contact with an inmate, it is classified as "Institutional Sexual Assault".

f.

"Good Faith" reports of sexual abuse based upon a reasonable belief that the alleged conduct occurred shall NOT constitute falsely reporting an incident or lying even if the investigation does not provide enough evidence to support the allegation.

While reviewing this standard, I interviewed inmates who were either involved in such disciplinary or were aware of the Jails procedures related to discipline in a PREA situation. As I discussed the policy with the inmates they could tell me that that they have information on the PREA policy and disciplinary policy in their handbook and it was also provided in the housing unit on the electronic tablets. As with all inmates, those I spoke to were not happy about any type of disciplinary sanction, they did understand the policies of the jail and were aware of how they worked.

I discussed the disciplinary procedures with facility management and noted that it meets Wolfe-McDonald standards for disciplinary standards. All inmates receive an inmate handbook that also outlines the jails disciplinary policy. The disciplinary policy does have appeal rights built within for all inmates to be afforded the right to appeal their decision through the chain of command.

Summation

The auditor was able to review the policy and see the components of this standard were present in PREA Policy regarding discipline, which is included in the handbook and also on the electronic tablets. The interview with inmates and targeted inmates provided background to the agency's policy met the components of the standard and were easily accessible to all inmates. Those inmates were aware of the policy and understood how it would work if they would violate it. Management could explain their process in relation to the standard and how it fits within the jail operations.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.78 and all aspects therein. There is no corrective action required.

115.81 | Medical and mental health screenings; history of sexual abuse

Auditor Overall Determination: Meets Standard

Auditor Discussion

- 1) Pre-Audit Questionnaire
- 2) PREA Policy section regarding Medical and Mental Health care
- 3) The contract for Medical and Mental Health Services between the Franklin County Jail and Prime Care Medical
- 4) Prime Care Medical PREA Policy
- 5) Interview with Prime Care HSA and Company President
- 6) Interview with the PREA Coordinator and Compliance Manager
- 7) Services provided by Franklin & Fulton Counties Women In Need, Inc.
- 8) Interviews with Inmates

a, b, c.

The auditor reviewed the facility PREA policy regarding the Medical and Mental Health section, the contract between Prime Care medical and the county, as well as Prime Care Medical's company-wide PREA policy. I also spoke to Prison Management, Prime Care HSA, and the company President.

According to the PREA policy, the intake done by medical personnel will screen inmates for prior sexual victimization, "whether it occurred in a jail or community setting". The jail staff will ensure that the inmate is offered a follow-up medical or mental health professional within 14-days of the intake screening according to policy and in discussion with management.

The facility under their policy will also ensure that any inmate who indicates that they have perpetrated sexual abuse, no matter where it occurred will ensure that the inmate is offered follow-up meetings with mental health professionals within 14-days of commitment to the facility. Prime Care uses a program called CorEMR which is a correctional-based software program. the software has an intake section for PREA and will automatically notify of needed follow up.

I had the opportunity to interview the Health Services Administrator for Prime Care Medical concerning the services they offer to the facility. He indicated that Prime Care's corporate policy also addresses this standard and upon receiving the screening documentation would meet with the inmates and discuss the services, making them available to the inmate. It should be noted that the HSA has an extensive background in Mental health services as well as his medical training.

d, e.

PREA policy dictates that information related to sexual victimization or abusiveness that occurred in a jail setting will be limited to medical and mental health professionals and other

staff ONLY as needed for treatment plans or security and management decisions. Such information according to management is kept confidential.

The policy indicates that medical and mental health professionals shall obtain informed consent from the inmate before reporting prior sexual victimization that did not occur in a jail/prison setting unless the inmate is under 18 years old.

When speaking to the HSA, he stated that all inmates are screened within the first 24 hours by her nurses, and determining prior victimization or perpetrator are part of this screening. When someone falls into these criteria they will offer the services and schedule them to speak to the inmate to complete an implied consent form. I was provided a copy of that consent form. As an example, she would have them see the facility doctor if medical treatment was requested, and have the corporate Psychologist see them. They also mental health personnel on staff with Prime Care and would have the inmate schedule with them as needed.

During interviews with inmates and discussing medical evaluations upon their commitment to the facility, they could verbally walk me through the process and recalled questions about previous victimization and/or involvement in sexual abuse. They indicated these questions were also presented to them through booking and again when speaking with counselors.

Summation

The auditor was able to review the jail and medical provider policy and see the components and how they work. The HSA was able to articulate the policy and how the inmates are screened and how they offer services to an inmate. Inmates could explain the process to me and indicated that they are asked on more than one occasion. The steps the facility has in play are working within the components of the standards to meet the inmates needs as well as complying with the standards and their timelines.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.81 and all aspects therein. There is no corrective action required.

115.82 Access to emergency medical and mental health services

Auditor Overall Determination: Meets Standard

Auditor Discussion

- 1) Pre-Audit Questionnaire
- 2) Facility PREA Policy regarding Emergency Medical and Mental Health Services
- 3) Contract with Women In Need, Inc.
- 4) Prime Care Medical PREA Policy
- 5) Interview with the PREA coordinator and Compliance Manager
- 6) Interview with Health Services Administrator (HSA)
- 7) Chambersburg Hospital SAFE/SANE Program

a.

The Auditor reviewed the PREA policy regarding the emergency medical and mental health services portion that states all victims of sexual abuse will receive in a timely manner emergency medical treatment and crisis intervention services. The jail does this through Prime Care Medical and the Chambersburg Hospital for forensic medical exams.

According to the PREA Compliance Manager nurses on duty with Prime Care would provide the Hospital with necessary information while sending the inmate to the emergency department at the hospital where their SAFE/SANE program would address the needs of the inmate as it would for any victim. The Lieutenant on duty handling the incident would contact the medical department to immediately respond to the situation, and Women In Need, Inc. would be notified to have crisis intervention services available to the victim as soon as they arrive at the hospital.

b.

Prime Care medical qualified medical staff available 24/7 at the Franklin County Jail and provide for all medical needs (including emergency) at the facility. The facility has worked with Prime Care for several years and provides full medical and mental health services around the clock at the facility.

c, d.

PREA policy indicates that inmates at the jail will provide emergency medical access free to the inmate without cost in a timely manner. This includes but is not limited to information about emergency contraception, sexually transmitted infections, prophylaxis was medically appropriate.

In discussions with the HSA and PREA Coordinator, they indicated both the facility Prime Care has a policy concerning the components of this standard. They also indicated that they have not had any inmates need emergency medical care in relation to sexual abuse or allegation over the last year.

Summation

The Auditor found that the facility PREA Policy, contract with Women In Need, Inc., and the procedures of Prime Care Medical related to medical and mental health services specifically breaks down the standard components to address the needs of inmates The PREA Coordinator, Compliance Manager, and HSA all could explain the steps used to get an inmate emergency medical care, addressing all the components of this standard.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.82 and all aspects therein. There is no corrective action required.

115.83 Ongoing medical and mental health care for sexual abuse victims and abusers

Auditor Overall Determination: Meets Standard

Auditor Discussion

- 1) Pre-Audit Questionnaire
- 2) PREA Policy regarding Medical and Mental Health Services
- 3) Prime Care Medical CorEMR (Correctional Electronic Medical Records) System
- 4) Contract with Women In Need, Inc.
- 5) Interview with the PREA Coordinator and Compliance Manager
- 6) Interviews with Case Worker
- 7) Interview with HSA

a, b, c.

The Auditor reviewed the pre-audit questionnaire and PREA policy on medical and mental health care the outlined continued to care for all inmates of sexual assault including any that occurred in another confinement facility or in the community. Prime Care Medical will provide ongoing medical and mental health services both inhouse and through outside community providers as needed.

According to the HSA Prime Care will develop an action plan for anyone under care when released that could include pre-scheduled mental health care through the county agency, follow up counseling with a local provider, etc. He also stated that the continuity of care offered at the facility is equal to that on the outside. The agencies and contractors that come into the facility practice in the community already.

d, e, f, g.

As indicated under 115.82, the jail policy and that if Prime care medical state that any victim of sexual abuse will receive free medical care and will receive comprehensive information about and timely access to lawful pregnancy-related medical services and testing for sexually transmitted infections.

In discussions with the PREA Coordinator, Compliance Manager, and HSA they could explain the details of the policies. I further discussed the use of a SAFE/SANE program with the HSA and what they would do with the hospital to assure all inmates sent to the Emergency room would be handled as any victim coming in. Management discussed the use of the Women In Need, Inc. program and their services as a victims advocate for any inmate.

h.

N/A – The facility is a county jail.

Summation

The Auditor reviewed the information provided and the answers to questions asked to review the components to get a picture of this standard. The Coordinator, Compliance Manager, and HSA provided detailed information about the process for services to inmates both through internal and external resources to meet the components of the standard.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.84 and all aspects therein. There is no corrective action required.

115.86 | Sexual abuse incident reviews

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

- 1) PRE-Audit Questionnaire
- 2) Facility PREA Policy for sexual abuse incident review
- 3) Facility investigative reports and incident review
- 4) Interview with the PREA Coordinator and Compliance Manager
- 5) Interview the Warden
- 6) Confidential County Inmate Sexual Abuse/Harassment Report PA Department of Corrections

a.

The auditor reviewed the Pre-audit questionnaire and the PREA Policy regarding a sexual incident review that governs data collection and retention. I also spoke with the Warden, PREA Coordinator and Compliance Manager, Major, and HSA. The facility according to their policy conduct a sexual abuse review on all allegations following the investigation. The review will occur if the allegation is substantiated or unsubstantiated but will not occur if the allegation is unfounded.

b.

It was noted in the policy an on documentation provide to this auditor to review that the review will and had occurred in 30-days. Although there was not any cases requiring incident review in the previous 12 months, I was able to review all the investigative data on the unfounded case they have had.

C.

According to policy and in discussion with management personnel the jail has the Warden, Deputy Warden of Operations (PREA coordinator), Deputy Warden of facility services (PREA Compliance Manager), Major, Captain of Investigations, HSA, and the Mental Health Administrator sit on the investigative committee for all incident reviews. In speaking to management, they could all explain the team and their review process in addressing each case should they need.

d.

The review team will according to the policy have discussions and consider the following: the need for change in policy practice to better prevent, detect, or respond to sexual abuse; was the allegation motivated by race, ethnicity, gender identity, LGBTI, or gang affiliation or another motivated group; Examine the location to determine if physical barriers facilitated the incident and recommend any corrective action; assess staffing levels of area and also all 3 shifts; determine if monitoring such as video, intercoms, or tours of the area should be

changed or added.

e.

According to the Warden, they look at every incident (even if not PREA related) for adjustments to the facility or operational standards and policies to make changes if needed. He went on to discuss that this is common practice with his team to assure both safety and security.

Summation

The PREA Policy covers all necessary components of this standard. Through discussions with Management, it is apparent that they dedicate time to assure the policy is followed and address the needs of both the inmates and the facility. They work within the standards but also spend time on all incidents filed to assure compliance with the standard plus assure safety and security of the facility, looking at findings to make the necessary adjustments to the facility or its' operation. The Auditor was able to use the data along with his understanding of the process and component to establish that the are the components of the standard.

Based on available evidence and analysis at the facility this auditor has determined that the facility exceeds standard 115.86 and all aspects therein. There is no corrective action required.

115.87 **Data collection Auditor Overall Determination:** Meets Standard **Auditor Discussion** 1) Pre-Audit Questionnaire 2) PREA Policy regarding Data Collections 3) Franklin County website: www.franklincountypa.gov/Jail 4) Interview with the PREA Coordinator and Compliance Manager 5) Interview with Major 6) PA Department of Corrections - County Jail Reporting Requirements a. The PREA policy indicates that all information collected from every incident/allegation investigated: That the Jail will maintain, review and collect data as needed from all available incident-based documents including reports, investigation files, and abuse incident review documents. They will also include at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. b, c, d, e, f. According to policy and discussion with management personnel the Franklin County Jail

According to policy and discussion with management personnel the Franklin County Jail provides aggregated data collected for the Department of Justice no later than June 30th. The Major indicated that they contact all their contracted facilities to report on an individual being held for Franklin County. The Captain of Investigations will be the "keeper" of this data and will submit an annual report to the Warden for the summary of sexual violence report to the Department of Justice and to be placed on their county website. The county will according to policy maintain the minimum information needed to answer all questions related to the incident.

Data will be requested from all other facilities that the Jail contracts if they have housed any inmates in those facilities.

It should be noted that every January each county correctional facility in Pennsylvania is also required to report to the PA Department of Corrections Office of County Inspection their aggregated data. This is a requirement of PA Title 37, chapter 95 as well.

During the pre-audit and on-site portion, I was able to review the data the facility keeps as well as view the redacted version placed on their website from previous years.

Summation

The Auditor through the PREA policy and interview with management at the facility was able to

correlate the policy and data I reviewed. Because of how they handled this data throughout the year, it was easily accessible. This information together brings the facility into compliance with the components of this standard.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.387 and all aspects therein. There is no corrective action required.

115.88 Data review for corrective action

Auditor Overall Determination: Meets Standard

Auditor Discussion

- 1) Pre-Audit Questionnaire
- 2) PREA Policy regarding data used for corrective action
- 3) Annual data collected by the Franklin County Jail
- 4) PA DOC Office of County Inspection annual statistical report
- 5) Interview with the PREA Coordinator, Compliance Manager, major, and Warden

a.

The auditor reviewed the pre-audit questionnaire and the PREA policy section on data used for corrective action indicating that the facility would aggregate in order to assess and improve the effectiveness of sexual abuse prevention, detection, and response policy, practice, and training. They complete the following: Identify problem areas; corrective action, and; prepare for annual reporting on the agency's findings and corrective action for the facility as a whole. This review and finalizing of the report is done by the Warden, PREA Coordinator, Compliance Manager, Major, and Captain.

According to the Warden, the data has been helpful in assessing facility needs both in policy changes for security and safety. It could also be used to justify budgetary needs for facility upgrades.

b, c.

The report is compared to previous reports and approved by the Warden then made public on the website and placed on the county website.

I had the opportunity to review the report on the county's website. The report provided the necessary PREA data that was aggregated from the year. The agency also provides several PREA related documents on the website about the PREA standards, the facilities reporting, and also ways reporting sexual abuse/harassment can be done.

d.

The policy does allow the county to redact any information from the report that would present a clear and specific threat to the safety and security of the jail. It goes on to state that the nature of the redacted materials must be indicated. The data provided from last year did not have any redacted information.

Summation

This auditor was able to review the policy, collected and reported data, and discussions with management to triangulate the information showing the agency meets the standard. The

reports presented were well organized and simple in nature.

Based on available evidence and analysis at the facility this auditor has determined that the facility is in full compliance with standard 115.388 and all aspects therein. There is no corrective action required.

115.89 Data storage, publication, and destruction Auditor Overall Determination: Meets Standard Auditor Discussion 1) Pre-Audit Questionnaire 2) PREA Policy on data storage, publication, and destruction 3) Interview with the PREA Coordinator, Compliance manager, Makor, and Warden

a.

This Auditor reviewed the pre-Audit questionnaire and the PREA policy that indicates that the jail will maintain all collected data including investigative reports in a secure manner. According to the management team, these items are secured in her office as required by the policy. The same is true of electronic records, they are kept there as well on a secure drive per policy. The Major was responsible for the retention in his previous role and will be passing that duty on to the new incoming Captain.

b, c, d.

The policy indicates that all sexual abuse data will be published annually on the county's website. According to the Major, all personnel identifiers are removed before this report is published. As indicated earlier the Captain of Investigations is responsible for the data and generating the report that is approved by the Warden and his team before being published.

Data, according to the policy and discussed with management will be maintained for 10 years after the initial collections unless the law requires otherwise. The Captains Office is a secure location with locking cabinets for securing said data.

Summation

The information provided to the auditor to review has all the components to adequately meet this standard. The PREA Coordinator provided detail of the storage and retention policy and how the data is made public.

115.401 Frequency and scope of audits Auditor Overall Determination: Meets Standard **Auditor Discussion** a. The facility is not a compound, but instead is one building on one level built for and operated by the County of Franklin located in Chambersburg Pennsylvania. b. This is the first year of the current audit cycle and the 2rnd audit of this facility. h. The auditor was able to see all parts of the facility when touring. i. The auditor was given multiple documents and more upon request during the onsite and emailed during the post-audit. m. The auditor was given complete privacy in all situations at the facility. When interviewing inmates, I was permitted to use multipurpose rooms in the housing units. The room had windows, but the door was able to be closed for privacy when talking. The same was true for a secure room to work in when interviewing staff. n. Inmates were permitted to send confidential materials to the address provided.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	f.
	This is the 2nd audit cycle for the Franklin County Jail. During my discussion with The PREA Coordinator, Compliance Manager, and Warden they all indicated that they placed their reports on their website, as well as the PREA Policy, Zero-tolerance policy, and information on ways to report. I was able to review all data that was included in the pre-audit data and also on their website.

Appendix: Provision Findings			
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA	coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes	
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes	
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA	coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes	
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes	
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes	
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator		
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes	
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes	
115.12 (a)	Contracting with other entities for the confinement of inmates		
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes	
115.12 (b)	Contracting with other entities for the confinement of inmates		
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes	
115.13 (a)	Supervision and monitoring		
	Does the facility have a documented staffing plan that provides for	yes	

adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes

115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes

115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	yes
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes

115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross- gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual	yes

abuse and sexual harassment, including: inmates who are blind or have low vision?	
Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?	yes
Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?	yes
Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?	yes
Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities?	yes
Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes

115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes

115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes

115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes

115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	
115.18 (b)	Upgrades to facilities and technologies If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since	na

115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na
	Has the agency documented its efforts to secure services from rape crisis centers?	yes

115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	na
115.22 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes

115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes

115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	no
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes

115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes

115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes

115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes

115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes

115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes

115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes

115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no

115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes

115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes

115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes

115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes

115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

115.64 (a)	Staff first responder duties		
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes	
115.64 (b)	Staff first responder duties		
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes	
115.65 (a)	Coordinated response		
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes	
115.66 (a)	Preservation of ability to protect inmates from contact with abu	sers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes	

115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes

115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes

115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (I)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes

115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes

115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming	yes

115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes

115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victinabusers	ms and
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes

115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	na
115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes

115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes

115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes

115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes